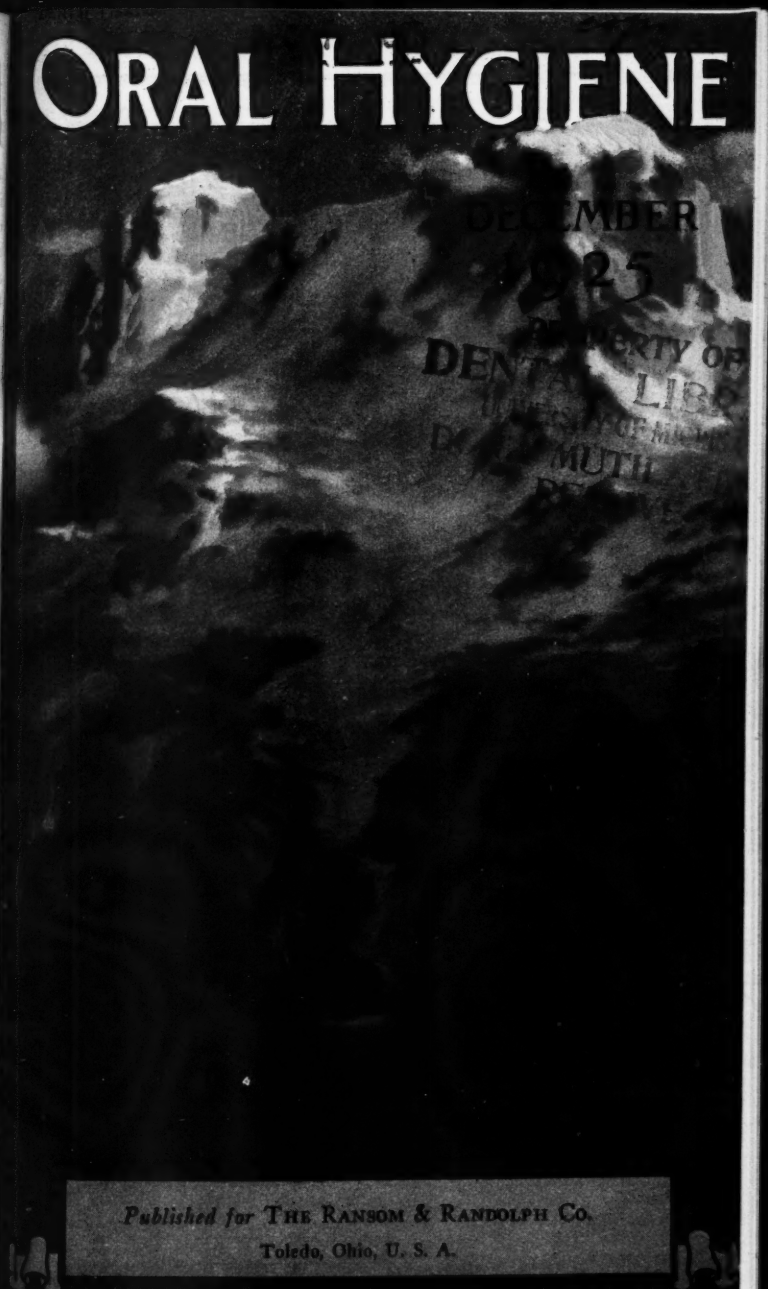
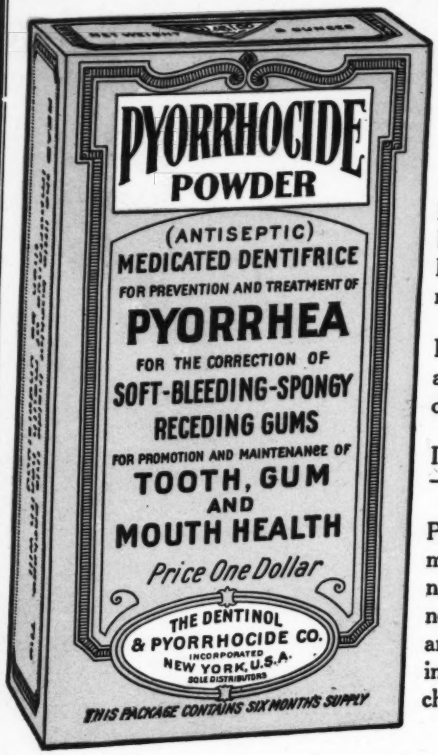
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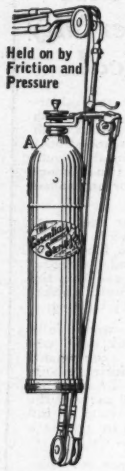
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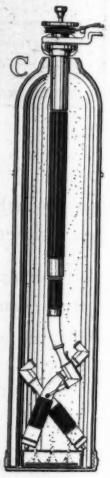
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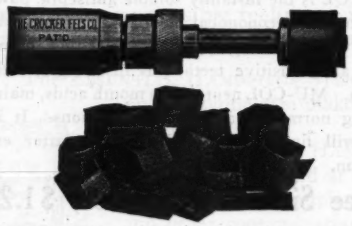
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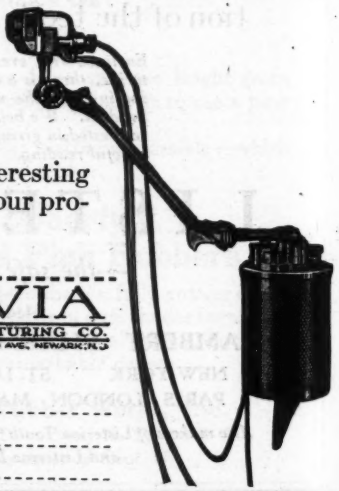
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Professional Comment

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Oral Hygiene

Christmas 1925



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Editorial Office, 212 Jenkins Bldg., Pittsburgh, Pa.
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ADDRESS CHANGES—Since we must start addressing wrappers early in the month preceding the month of issue, it is necessary that address changes reach the district publisher by the first day of the month preceding the issue to be affected. Changes received on December first, for instance, will first affect the January issue. Changes received later in December will first affect the February issue. Both the old and the new address should in all cases be furnished.

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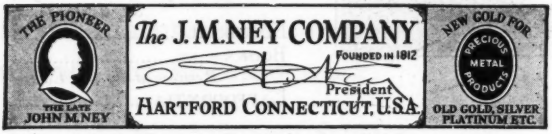
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ORAL HYGIENE

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FOUNDED 1911 DECEMBER, 1925 VOL. 15, NO. 12

It Must Go

Dear Dr. McGee:

Keep hammering away; keep everlastingly at it. You are going to win out in this matter of reciprocity sooner or later and perhaps sooner than you think, for I believe that a majority of the profession are with you today. You will win because the present situation, as you say, is unamerican and discreditable to the profession.

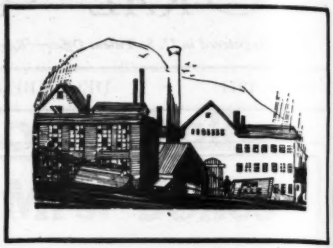
The present situation is not being maintained in the interests of either the public or the profession as a whole but in the selfish interests of a small minority of the profession. It must go and it will not be endured much longer.

Cordially yours,

J. Leon Williams, D. D. S.

Concord Haven Farm,
Solon, Maine.

How Industry Profits by Industrial Dentistry



By FREDERICK A. KEYES, D.M.D., Boston, Mass.

PREPAREDNESS and efficiency are the watchwords of the age. This is especially true in industry. Any device which will conserve power and increase output is immediately tried thoroughly, sometimes at the cost of many dollars. The slogan is always: the greatest results with the least expenditure of power. Now man is power; his health controls his output. Therefore, any device that will increase his efficiency is an economic investment.

The object of this paper is to show you as an employer of man-power the direct relation of neglected teeth to decreased efficiency.

Let us take the case of any employe in your plant — John Smith, we will say, reports for work with a toothache. He works all day. His tooth gets worse. By afternoon he has perceptible swelling, and either asks off to go to the dentist, or "sticks it out," which means half-hearted work for the remainder of the day.

If he does not go to the dentist, this condition may continue for several days, depending on John's vitality, but at the end of this time Nature fights off the infection, the pain and swelling disappear, and John, though somewhat weak and indifferent, gradually becomes as good a workman as he ever was. This condition reappears two or three times a year and John suffers the same experience.

Now this is what has actually happened to John:

A small cavity in a tooth, which might have been filled at the beginning, has increased in size until the nerve or pulp has been exposed and infected with active pus-producing germs—an abscess is formed at the end or apex of the tooth.

The abscess breaks, thus giving an outlet to the pus, and all

An open letter to employers

YOU have spent much time and money in perfecting machinery in your plant. What are you doing to increase the human efficiency of the men who operate it?

There are at all times 3,000,000 people in the United States seriously ill. How many of these are in your factory?

Four out of five people in the United States have decayed teeth. Is the rate any higher in your factory?

It is estimated that 40 per cent of absences from work are due to bad teeth and their consequences.

Dr. Osler says decayed teeth cause more harm to the human race than alcohol—less than 1 per cent are drunkards; 80 per cent neglect their teeth.

There are 60,000,000 wage-earners in the United States. All must die. What are their teeth doing to erect their tombstones?

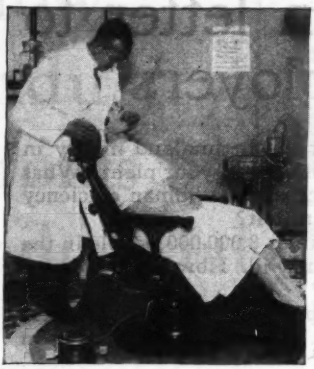
Over one hundred industrial plants at present have dental clinics. Are you one of them? If not, why not?

is apparently quiet again. But this is really not the case. The dead nerve gives birth to millions of pus-producing germs, which are always active, and instead of forming an acute abscess, the pus is absorbed by John's blood and lymphatic stream and carried through his system, eventually causing diseases such as endocarditis (heart disease), rheumatism, etc.

Thus may one tooth neglected cause permanent disability and the loss of a valuable employe. Multiply this by millions, and you have a fair idea of what is happening daily in your factories.

Industrial Dental Clinics

It pays, then, to take care of your employes' teeth. What is the best way to do it? This



An industrial dental clinic is to be found even in so unexpected a place as Lyons' tea-shops, London who have found it good business to maintain oral hygiene for their employes.

© Keystone View Co.

question has been answered by over one hundred leaders in industry who have established dental clinics in their plants. What are the advantages of such a clinic? Briefly they are:

1. Eliminating loss of time in going to local dentists.
2. Loss of power in lessening possibility of decreased efficiency.
3. Prevention of future disability by treating the first source of disease (employe knowing of industrial dentist will visit him immediately).

Another advantage arises from the good will which will accompany such a move, which always promotes efficiency.

The amount of time spent in going to a dentist outside the factory is estimated at three hours. This work may be done by the industrial dentist in half an hour. The waste—two and one-half hours—represents a loss in money, not only to the employe, but to the employer.

These three firms are taken at random from a list of over one hundred industrial institutions which are equipped with dental infirmaries. The first of these was started in 1911 in Akron, Ohio, in the factory of the Barker Match Company. Since that time others have been established, and it is a significant fact that nowhere has a clinic once established ever been discontinued. This shows that the industrial dental clinic is not a fad, but a practical investment.

The cost of a dental department would be small compared with the results. Most of the companies pay for the installation of dental equipment and charge employes a nominal fee, which pays the salary of the dentist and the upkeep of the infirm-

ary. The expense of needy cases is borne by the company.

That industrial dentistry is fast becoming a national institution may be seen from the fact that already there exists an association of industrial dentists whose membership increases almost daily.

Dr. E. L. Pettibone, secretary of this Association of Industrial Dental Surgeons, says:

Twenty-five per cent of the men in the factories today can have their efficiency increased by having their mouths put in good condition. How do I know? Because we examined the mouths of hundreds of the 21-23-year-old men of the draft, and what did we find? Twenty per cent of their mouths in a terrible condition—foul, neglected, nothing ever done to keep them healthy. Ten per cent more needed fillings to keep them comfortable. So my 25 per cent is very conservative, because you have all the men working for you that Uncle Sam turned down because they did not have at least 12 teeth—three in the front above that struck three below and three at the back above that struck three below. In addition to these, you have all the older men and, as a rule, their teeth would not be as good as those of the younger men.

There are four different kinds of industrial dental dispensaries: *First,* those wherein only examinations and prophylaxis are done; *second,* wherein examination, prophylaxis and fillings are done and a small charge made to the employes; *third,* wherein all types of dentistry are done for employes entirely at the company's expense; *fourth,* those wherein work is done only for the employes' children—this is



John asks off to go to the dentist. A plant dentist saves on an average of two and a half hours in such cases.

building for the future employes. Many industrial dispensaries have been started since the war. If Uncle Sam needed dentists for his soldiers why should we not have them for our *industrial* army?

If a firm cannot be influenced to spend money on a dental clinic, ask the employes to vote on whether they would support a dental dispensary if installed and make it self-sustaining. The firm would be ahead then in just the time saved by employes laying off to go to dentists.

Reprints of this article will be furnished at cost by ORAL HYGIENE to members of the profession who desire them for use in campaigning for industrial dental clinics. Please address your request to ORAL HYGIENE, Publication Office, 31 Imperial Power Bldg., Pittsburgh, Pa.

Dear Doctor:

Your editorial "Are We Citizens of the United States?" is excellent. I agree heartily with your idea on national reciprocity. Have had some experience with present conditions. My services and assistance in any way. Keep the good work up.

Respectfully yours,

F. H. POND, D. D. S.

Philadelphia, Pa.

My Dear Doctor McGee:

Your work on national reciprocity is fine and I hope you keep it up. Personally I do not see a broadminded argument in favor of the present conditions and some of them are ridiculous such as "increasing the number of the floating members of the profession," as if there was such a thing in a profession that takes from two to five years of practice in one locality to put it on a paying basis.

The number of dentists employed by other dentists is not worth considering even if they all floated. Perhaps you will be the means of making the dentist and the profession itself a bigger thing than the present two by four outlook that many of us have.

With my best wishes and thanks for work you have undertaken.

Sincerely,

O. C. SAMPHERE, D. D. S.

West Allis, Wis.

The Practical Side of Mouth Hygiene

By JOS. H. KAUFFMANN, D.D.S., New York, N. Y.

Dental Department, Bronx Hospital and Dispensary and Member of the Oral Hygiene Committee of Greater New York

SOME words have different meanings to different people. There is a story told of a physician's little daughter who, having met one of her father's patients in the reception room was asked as to the whereabouts of the doctor —to which she replied, "Daddy is out giving an anesthetic." The bewildered adult, taken back at the use of such a large word by so small a tot, queried, "And what does that mean?" Quickly the answer was, "Oh, twenty-five dollars."

The term oral hygiene is used quite broadly as it sails the seven seas of dentistry. It encompasses the study which enables us to learn how better to preserve our health and guard against disease by faithfully using all the ways and means at our command which will keep the mouth and teeth in healthful condition.

Due to the practical state of mind of the average dentist prompted mostly by the very nature of his daily work, it is not easy to engage his attention unless he is presented with ideas that can be carried out in every-day fashion for every-day patients. While this attitude is not an ideal one, it *is such,* nevertheless, and he who theorizes with dentists is lost. Consequently all remarks will be made with the foregoing thought constantly in mind, remembering also the value of a little originality.

We will reduce our discussion to three definite phases. First the public health or educational side of the question, collectively considered, which conveys to many minds a hazy, idealistic proposition but carries with it to others fantastic hallucinations of an imaginary stomatological paradise.

Secondly, the patient as an individual self-practising propagandist whose consideration brings us to the third or most personal phase.

In the latter are involved all those procedures which can be carried out by the dentist himself, whether in general or special practise.

Every movement has its historical back-ground. Project upon the screen the critical step taken by the Americans, Gillete and Hayden, in founding the Baltimore College of Dentistry in 1839, and you realize that we have only reached our eighty-sixth birthday.

Coming up to recent times we arrive at the inception of a definite oral hygiene movement in our own country during the latter part of the last century with the important events contributing to its growth to date, a brief sketch of which may be found in the February 1925 ORAL HYGIENE.*

It is needless to repeat names at this time, not only because of possible injustice to some men through oversight but because the list of self-sacrificing volunteers would be too long.

In the *Cosmos* of this month,† Dr. Anthony cites some of the late noteworthy papers on oral hygiene and, incidentally, each year his review, similar to one by Dr. Bunting of Michigan, is a good reminder for its references to dental literature. We sincerely hope that the newest publication of the Allied Dental Council called *The Gateway to Health,* intended for the laity, will have a useful and successful career. It will be analagous to *Hygeia,* the lay journal of the American Medical Association.

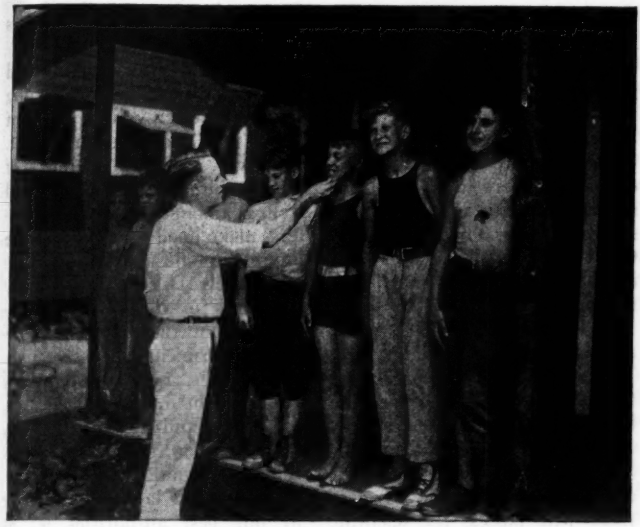
The big thing to-day in the oral hygiene movement is the teaching of the youth of our country the value of sound teeth, for they will be the future citizens and parents. Those of us who will not participate in one way or another are shirking a civic and professional duty. Seriously speaking, has it ever occurred to you that if we do not do this voluntarily the time may come when the public will take the matter into their own hands? Prevention is the one and only hope for humanity for it is a sure thing that the great masses of the people under constant economic pressure cannot afford the refinements of curative and restorative dentistry. It is only the minority who are fortunate and some of these are too often reluctant decently to recompense the professional man. Even so, a profession is not a business and the doctor must swallow the bitter with the sweet.

Say what you like, you cannot evade the truth that the real reason for the neglect of our public-spirited opportunities is just pure selfishness. By the way, here is a good chance for the practical dentist to be very practical in the application of his religious thoughts concerning doing good for others.

Give a talk if only to an audience of a dozen illiterate mothers; write a story even if reduced to kindergarten terms, draw a chart or paint a picture for a dental health exhibit; offer a prize for the best set of teeth in your old school, attend a clinic for the dental needs of the poor. Even though you receive no remuneration—do something. Let's all get together on this;

*Page 216, February, 1925, ORAL HYGIENE.

†September, 1925, *Dental Cosmos.*



Fotograms.

Part of the routine at the Salvation Army Camp for Young People at Star Lake, N. J.

actions speak louder than words!

And now for the individual and his own responsibility in the mouth hygiene propaganda. It may be put down as a general observation in Nature that animal organisms develop and maintain themselves along the lines of least resistance even from their very inception during the continuous process of embryonic development. This presents an analogy in every-day oral hygiene. It was never intended that procedures prosecuted in the practice of mouth hygiene should be intricate or involved and in suggesting necessary steps in the care of the mouth and teeth, the nearer we approach the simplest measures the closer are we to Nature and the more beneficial are the results.

A safe and clear conception of the practice of mouth hygiene is one in which we engage as a basis the fact that, in all the ages during which the human dentition was involved with its panorama of marvel and adaptibility Nature never depended upon toothbrush or mouthwash.

We must admit, however, in proper consideration that civilized man is now in a modern and very changed environment. As a consequence of our so-called advancement we continually compromise to our detriment with Nature's code and the result is a condition which requires a system of hygienic artificiality.

The great majority of human

beings never have held a toothbrush in their hands. A portion of that multitude seem to fare just as well without it because theirs is a system of natural hygiene.

Humans are a bit careless, especially where there is no immediate discomfort. For instance, consider a man's stomach. Good God, what he puts into it! Even a puppy is more particular.

People say that what we eat and drink makes us what we are. There certainly is a poignant effect of our diet upon all the bodily structures. Just how far we can trace this association will have to be left in the hands of competent investigators, to those who possess the scientific attitude and training. It is safe to assert that a natural course of eating with the elimination of denatured preparations cannot be wrong. But in this age even our diet is jazzed. The application of discretion to what, how and when we eat may guide some of us, but laxity and poverty make others suffer. In all probability, if we clung to a more natural food course, dental disease would be much less prevalent. But we don't, so there you are.

Once your selection is in your mouth, there's only a journey of nine or ten inches, a short ride but often an expensive one. Keeping to the path marked practical, although not confined to dentistry, our contention is that we all eat too much of what we shouldn't, too fast and too often. The old Dean of our college used to say, "Boys, always leave the table a little hungry."

We could offer a long and detailed exposition concerning foods and their values, most of which you would soon forget. However, works on dietetics of which subject McCollum and Kellog, amongst others, are masters, make good reading and are interesting and instructive. Unfortunately there is a grave drawback in the favorable application of the results of animal experimentation to man. Guinea-pigs, rats and monkeys are all right in their place, but, as Potash and Perlmutter say, "The human species is something else again."

The gist of latest food advice by our best authorities is: at least a quart of milk a day, plenty of fresh vegetables, not ruined by being boiled out, salads and greens of all kinds, some fruit, less meats, unadulterated bread and good clean water in quantity.

Tell this to your patient, "the girl with the five dollar bill" as the editor of *Items of Interest* used to call her in "Round the Table."

Young America should spend its pennies for more apples and less candy. It is incorrect, however, to say that children should not eat candy — the trouble is that they eat too much of it. Little ones who are taught frugality in respect to "sweets" have less acidosis, healthier color and, without any doubt, better teeth. No one knows, not even men like Gies and Kirk, the definate bio-chemistry of the teeth

and saliva as related to carbohydrate metabolism, but daily observation imparts to you all the clinical truth of these statements. There can be no doubt as to the purely local condition which exists when food remnants, especially carbohydrates, stick to the mucin plaques on rough surfaces of the teeth forming a hotbed of fermentation for carious activity.

The evil that food particles do lives after them.

The micro-organisms are there to be mated and the offspring is decay. That is one of the principal reasons demanding the necessity of a toothbrush among soft and sweet food eaters such as we are today.

Every dentist should be able to discuss the food question with his patients and make it a part of his advice in oral hygiene.

Artificial mouth hygiene implies the use of toothbrush, dentifrice and mouthwash, to which may be added as accessories: tongue-scraper, dental floss, orange stick, cotton rolls and atomizer. Our position relative to dental disease should be one of offense rather than defense. The substantial plan of combating the manifest prevalence of dental caries lies in the field of prevention. To cure is an impossible task. Prevention is the key-note of modern medicine.

With systemic disadvantages engendering or enhancing a lowered mouth resistance it is hopeless to expect any local hygienic measures to produce the best results. All we achieve is a point of relative success—helping to keep matters from getting worse. This is proven by the occurrence of rapid tooth disintegration, particularly enamel failure almost literally in front of our eyes, notwithstanding your most concientious attention. We usually say: (and what else can we offer?) "Keep on brushing your teeth as well as you can," after which the patient is dismissed. Whereupon we hope for the best and expect to see the worst. Who among you will solve this?

In the last number of the *Journal of Dental Research* to which every dentist should be a subscriber, are two excellent studies on the histopathology of enamel by the eminent research student, Dr. J. Leon Williams. Incidentally the volume on his life and works by Dr. Clapp is an attractive review of an unusually cultured and intellectual dentist. We live in hopes that the future will bring forth more of his kind.

The ordinary, fairly healthy mouth requires no medication and should not be a bathing pool for the various contents of the pharmacopoeia. In the first place a properly constructed toothbrush used with a little elbow grease makes the dentifrice a very secondary consideration. The toothbrush should have no fancy frills, in fact here is a subject which requires careful consideration. Starting with the idea of no toothbrush whatsoever, if recorded history is correct, we should confine this contrivance as close to a negative quantity as is practically pos-

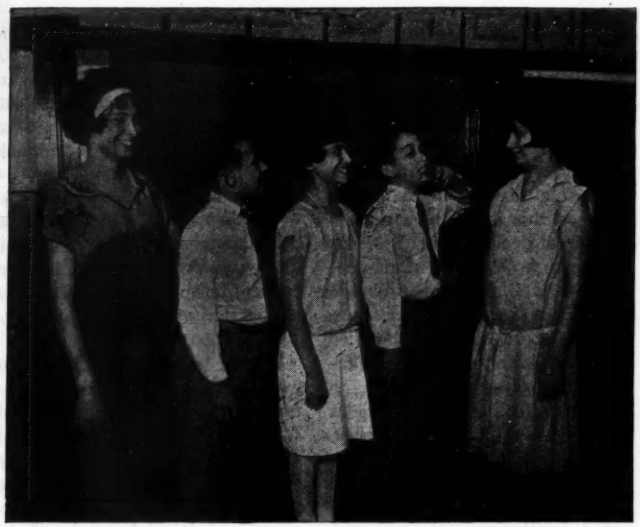
sible. Some dentists seem to think that the most widely advertised toothbrushes are the best, irrespective of what they look like. Their opinions are viewed with confidence by the public and should therefore be better qualified. How many of us have given careful thought to this subject? For those interested, there is a detailed study of the toothbrush in the *Cosmos* of March 1924. The writer would certainly appreciate discussion and correspondence with others on this subject which, strange to say, is so sadly neglected and treated after a fashion. All professional confrerés are cordially welcome at all times to inspect a collection of modern brushes to which additions are continually made as new and interesting specimens appear on the market. In a nutshell, they should be constructed smaller than they usually are, with heavier, non-flexible handles, less brushing surface and better and firmer bristles. Above all, the toothbrush must always be kept clean and dry, when not in use.

The dentifrice is a secondary matter. As its only purpose is to exert an auxiliary cleansing action, the druggy preparation should be exiled, notwithstanding what our self-appointed "foremost dental authorities" have to say. On the other hand there are many dentifrices varying considerably, which are useful in their own way, under certain conditions. There is, however, no universal dentifrice which is favorably applicable to all mouths and there is certainly none whose chemical properties alone will betoken it to remove all gelatinous plaques. However, the present bio-chemical studies by dentifrice manufacturers are —when sincere—not to be discouraged.

As a matter of economy a fine grade of precipitated chalk will fill the bill, or even salt or lime water will do when a powder cannot be obtained. The writer is distinctly in favor of powders for adults because of their frictional value in conjunction with the toothbrush and he is certainly in disagreement with those who advocate the free use of soap as an appreciable content of these preparations. Children when first initiated into oral hygiene enjoy tasty pastes for the same reason that they prefer candy to castor oil.

Finally we repeat, it is the toothbrush itself which does the real work, just as it is the combination of a housewife's elbow grease with a good brush and not the powder in the water that help most to keep our floors clean. We mention "housewife" because most dentists can't afford maids.

A substantial mouth wash is luke-warm salt water made made readily by having a salt container at the wash bowl. There may be myriads of other solutions more pretentious, some alkaline, others acid, with their vaunted health-giving properties but it is questionable if there is anything which even approaches the best one ever made, our own normal alkaline saliva. Of



Underwood & Underwood.

Oral hygiene inspection in a Chicago school.

course, if people want a pleasant taste as a pleasure in their daily toilet, there are plenty of such preparations to be had. Without disrespect, it seems to the writer that many of these things are made to be used by greenhorns. A few are useful in the office as we like to have something on hand which is pleasing to the patient and serves as a source of hygienic encouragement. They are all of little value as far as the microbe inhibiting contents are concerned. Their real usefulness lies simply on their pleasant state of fluidity which physical property allows them to serve as a rinsing medium. As we said before, our humble opinion resides in a glass of clean luke-warm salt water. Fortunately or unfortunately numerous 100 per cent Babbitts even commercialize a man's mouth and teeth.

It requires only a few lines to discuss the usefulness of six inches of dental floss. Here is a cleansing agent which is being taken up rapidly by the public and let us hope it will replace the old-fashioned splintery wooden toothpick. People with broad and close interproximal surfaces will find it gives a sense of relief in removing food debris where nothing else will do the work. It must be used with care and not plunged into the delicate gum margins. Paraphasing a well-known advertisement, we always ask our patients, "Have you a little dental floss in your home?"

Tongue scrapers are less fre-

quently employed: people have not yet reached that point. The long edge of the toothbrush handle serves the same purpose where it is desired. Orange sticks are occasionally recommended to be used with some form of abrasive. Daily indulgence in this device is a matter for you to decide upon: it seems though that overscrupulous people who would be the probable ones to engage in this procedure would also be the very ones to rub their teeth away, which, incidentally, is not impossible.

Cotton rolls within specially prepared applicators are occasionally used for purposes of massaging the soft tissues about the teeth and to express stagnated capillaries in the gingival. The atomizer is a nice thing with which to give oneself a mouth bath but we'd be happy if some people would just rinse their mouths. However, the fact that most people don't use these things is no reason why others shouldn't. As Dr. Johnson is quoted: "There's nothing too good for the human mouth."

Well, here we are back in the office ready for a day's work. Poor man, rich man, beggar man, thief—the possibilities are great. Whether you are a specialist or a general practitioner so long as you work in the oral cavity you are inseparably connected with oral hygiene.

Underlying any possible operation in the human mouth and forming the foundation of even the preliminary examination is the fundamental sense of cleanliness to which everything else is subordinated and without which nothing else is of value. Surely this is no new thought and it would be an insult to your intelligence to offer it as such. Yet it is well to remind ourselves that to know prevention and cleanliness and just what these words mean in the oral cavity is to know half of dentistry. A merely mechanistic conception of dental service is as barren as a thin soil over rocks.

In all seriousness, have you ever reflected upon the beauty of a clean and unmutilated mouth? Have you ever wished you could undo some of the things you have done in the practice of dentistry? Introspection is good for the soul and the writer does not wish to pose as an exception to the rule.

How is the spirit of oral hygiene definitely applied to the practise of dentistry? An examination of the mouth is the initial procedure. At this time we form a mental impression of what that particular mouth will look like when it is transformed into a state of health. That is, our vision is not dependent upon any particular kind of work technical procedures or fee, but is an imaginary view of a clean and corrected mouth.

Even the exodontist who probably sees his patient for a shorter time than any other practitioner can assist in bringing about or maintaining a condition of mouth hygiene by preventing unnecessary mutilation and controlling his operation in such a way as to take into con-

sideration the result and probable effect of his work.

The orthodontist needs be painstakingly careful since his apparatus is a constant source of attention relative to cleanliness and indeed none can begrudge him his reward following his worries. In spite of his skill and this work requires much of that trait, it is just a matter of how little damage will occur. The writer takes issue with any orthodontist who disputes this assertion. Therefore in actual practise he must maintain scrupulous hygienic control in order to achieve complete success: otherwise—what price glory?

The prosthodontist has a wonderful opportunity to practice mouth hygiene. Since his work is ultimately the insertion of an artificial substitute his diagnosis and planning is everything. We cannot dilate here: but who will deny that mouths are often robbed of a state of function less by what they lack through their edentulous condition than by what they must tolerate through replacement. Prosthetic dentistry claims some ingenious and progressive minds but we respectfully submit that these workers would do much good if they always combined their mechanical talents with the elements of mouth hygiene.

It's all right to see teeth wriggle but the dancer pays the piper every time.

The fewer teeth to be replaced the less harm you can do which merely shows that prevention is better than cure. If mouth hygiene is carried out properly by future generations, prosthesis below the age of fifty should be uncommon. But for all times to come we shall be in need of some useful and clean-cut prosthetic restorations.

When the general practitioner makes a chart of what he intends to do it is necessary to envisage the mouth as an entity —and not chop it up into sections. This reminds us of the gold inlay expert: no matter what your trouble is, he has an inlay to cure it. Which is another instance of so-called salesmanship, or exactly what oral hygiene is not.

How is the patient's health? Has he a tendency to rapid tooth disintegration? Will he keep his mouth clean after you make it so? Will it be in the best interests of *his* oral hygiene to insert that particular kind of a denture even though it brings a high fee? We always emphasize that the healthy condition of the natural teeth is fundamental and that the attention and work applied to artificial teeth is secondary.

Your next step is a thorough prophylactic treatment, a real cleaning in every sense of the word. It is the one operation which does more good than any other complete procedure at your hands. It establishes a beginning, it enlightens you and it rejuvenates the patient. Furthermore it helps decidedly to intrench your reputation as one who is interested in details and your patients judge you accordingly.

The prophylactic treatment

should be a very personal and cumulative operation. As you are going along you make mental and dental notes of what you observe. It affords you every opportunity to determine the finer points of diagnosis and there is in our humble opinion no oral hygienist yet born who can do this as well as yourself. She lacks the sense of relative values which the dentist alone in his wider sphere achieves. We wish to remind you, without prejudice that the original idea associated with the oral hygienist was that she would be employed in large public institutions, especially amongst children where the services of dentists were not entirely necessary or available. Only a few weeks ago one of these fair damsels advertising in a New York paper for a position offered as an inducement, if you please — the following of her own clientele.

The writer has a standardized cleaning technic in which he uses less than a dozen hand instruments. After all calcic deposits are thoroughly removed (and often this requires two or three hours) the teeth are polished and remaining stains removed by the use of either single or double end porte-polisher with wood points.

In the very beginning, as the Bible says, we originated our own one-two-three mixture which you may care to try: a combination of one part of precipitated chalk, two parts of silex and three of ground pumice all of which should be of the finest grade obtainable. This is made into a paste by means of hydrogen peroxide to which is added some flavoring agent in small quantity. No engine bristles are used except in cases of exceptionally resistant stain and then only with reluctance. These tear the fine unicellular gingival edges. We next use fine strips for any unremoved anterior proximal stains and dental floss is passed between all the teeth both to cleanse and for purpose of examination. After this the mouth is sprayed and the teeth, gums and palate swabbed with cotton rolls. At this point it is a good idea to take any removable dentures the patient may wear into the laboratory for a little scrubbing.

During the cleaning we observe the condition of the mouth as a whole, note different aspects of the saliva which by the way is a study in itself and arrive at a conception of the nature of the teeth. As we go along the patient is questioned in reference to home care and when possible, is asked to bring his toothbrush to the office. When the brush is brought in the writer trims the bristles after his own fashion as to what a brush should be and also gives the patient a demonstration of a simple rotary cleaning method. We are distinctly opposed to any complicated toothbrush exercise as it is unnecessary and discouraging. Advice as to home care is not considered complete until the patient's food habits are discussed and dietary suggestions offered.

When the actual cleaning is

terminated we remove all overhanging edges, projections or shoulders of fillings where possible to do so and make it a point to carve cusps and grooves into shapeless occusal surfaces of metallic restorations. Many times a trifling minor adjustment of an old filling inhibits a bleeding point or destroys the further progress of a peridental lesion.

Right here the writer wants to straighten out the conflict between the cleaning of teeth and the treatment of pyorrhea. Please remember that we fade away so to speak as we grow older and the alveolar process is a transitory structure. Relatively a man may have just as healthy a mouth with recession at sixty as he had without recession at thiry. In addition to which even some gingival hemmorhage and crusty accumulation doesn't always make a case for extended fuss-making. What is really a prophylactic treatment is often masqueraded under the guise of something else and of course the patient doesn't know.

Some recent refinements in standardization of dental periclasia chiefly by Dr. John Oppie McCall and Dr. Harold Box enable us to disestablish certain conditions although we never could see how the grinding of teeth was a logical form of treatment in spite of its apparently beneficial results. Where chronic suppuration and dental exuviation are concomitant, therapeutics may bring relief but, we insist, no cure. It can't be done and no one has ever scientifically proven the opposite. Dental periclasia in all of its forms is a menace to mouth hygiene and every instance of its first presence, when genuine, should be carefully noted.

While on the subject of infectious processes, our thoughts turn to the medical man and his part in mouth hygiene. The average medico is a conscientious person devoted to public service and we could well emulate his example.

But when it comes to stomatology he is woefully deficient in spite of his good intentions. Now here is something to think about: medical men speaking for their profession insist that dentists should first receive a medical course in order to know the whole body: all right for that, but, why is it that these very men who want us to know the whole body, do not themselves understand so small a part as the mouth?

Of course, two wrongs don't make a right, but why therefore the spirit of dictation and arrogance?

Dr. Charles Mayo asked the dental profession if they would recognize the importance of mouth hygiene and practice accordingly. In rejoinder we say to the medical profession: "You need education upon the human mouth; you must take the steps to enlighten yourselves; will you do it? Until you do so you should be more than willing to give the dentist full command of the mouth and teeth in the same good spirit with which he

is always willing to co-operate with you."

So far as systemic invasion, due to dental infection, is concerned, the writer's attitude is this: anything is possible, but, on the other hand *a priori* reasoning is fallacious. Therefore be conservative, don't claim or promise too much.

It is much better to be right in hesitation than to be wrong in haste.

We can all talk on mouth hygiene because talk is cheap: it would be well though if we would practice what we preach. Of course, everything we do is just a compromise with Nature and Nature takes some awful punishment.

Above all, we must teach people to *avoid* the necessity for dental service. The idea of cleanliness associated with healthy form and function should be paramount, whether your fee is one dollar or one thousand dollars. And it is not only the present that counts: this has even a deeper meaning when we think of the future mother and give her the proper consideration. From the day the child is born it is entitled to a clean mouth.

In conclusion: let's act on these things: to err is human and there isn't any doubt in the writer's mind that some of his mistakes have been corrected by others of our fraternity.

But we all need a more definite working conception of what's what in the human mouth so as to have at least an *ideal*. It's just in the way you look at oral hygiene, for as we first said, some words have different meanings to different people.

Dear Doctor McGee:

Your efforts toward bringing about reciprocity are mighty good to see, hope it can be attained; it should be, that is sure.

Fraternally yours,

E. B. HARTMAN, D. D. S.

Toledo, Ohio.

Dear Doctor:

Your articles in ORAL HYGIENE are always good, but I thought your editorial in the August issue on reciprocity was very fine. I trust in the next few years it will be a fact.

Yours truly,

H. H. WALLACE, D. D. S.

Bancroft, Neb.



The Country Dentist's Christmas

By JOHN H. HAYES

DID I have a Merry Christmas?
I'm so glad you asked me, friend;
If you think a country dentist
Ever had one, just attend.
When a fellow's home's his office
And the guests and patients ring
The same doorbell, let me tell you
Christmas doesn't mean a thing.
With the dawn on Christmas morning
Came a patient—number one.
Quickly dressed, I hurried down to
Find a mother and her son.
"Doctor, won't you fix poor Willie?
Broke some teeth, as you can see,
By colliding with the stair rail,
Sliding down to see the tree."
Next came Grandpa Hanks a-limping,
"Sorry, Doc, to trouble you,
But I tripped while playing Santa;
Plate fell out and broke in two,
Fix it some way, won't you Doctor?
Or the kids will find me out,
If I can't eat Christmas dinner;
Thanks, Doc, gee, but you're a scout!"
In the afternoon and evening,
Still they came—what could I do?
Kids with aches from hard-boiled candy;
Grown-ups for that reason too.
Did I say it wasn't Merry?
Guess that thought should be reversed;
For they have the Merriest Christmas,
Who make others merry first.

Some More Abou

By C. EDMUND KELL

IN ORAL HYGIENE for September, several of "our" readers have something to say upon this subject, and, in saying it, take exception to my original article (July issue), which started the trouble. Upon reading their letters, I immediately wrote to Drs. McGill and Jordan, asking them to furnish me with a "concrete example of *preventive dentistry* as carried out in their practices."

Now Dr. McGill was mighty nice about it and wrote me a good, long letter, trying his best to get out of his quandary, but, of course, he couldn't do the impossible, and he *did not* furnish any concrete (or any other kind of) example of preventive dentistry, but here follows what *he calls such a case*.

"You have asked me for a concrete example of preventive dentistry, as practiced by myself. A mother recently brought her daughter to me, complaining of a toothache. The child was ten years old and had never been to a dentist. The condition of her mouth was deplorable. Along with the rest, all of her first permanent molars were badly decayed—one of them, the lower left first molar, beyond any hope of restoration, had to be extracted. The mother by way of excusing herself said that she should have come in sooner but, that she had put it off thinking that she would wait until the teeth ached, have them extracted and then be done with them. Now isn't it a crime that that child should lose that keystone tooth through the ignorance of the mother?

"The next day that woman came into my office with her little son—just turned five. The child didn't have any toothache, he had only two tiny cavities, but he was in to have them fixed, and for prophylaxis and examination. Now that child, when he is ten years old, will not lose a permanent molar because his mother now knows what a mistake she had made with her daughter. She felt very badly about it and I am sure she will follow my instructions. She has been 'educated,' and as I said in my article, 'education is prevention.'"

Now I agree, and everybody else surely must agree, that Dr. McGill is absolutely right in every word he has said, but he has not given us a "concrete example of preventive dentistry." In the one case, he extracted a first permanent molar for the child, and in the other case, he cleaned the child's teeth and put in two tiny fillings, and both certainly were examples of dentistry of the "Simon pure" brand, and not adulterated with *preventives* or anything else.

"Education is prevention,"

"Preventive Dentistry"

D.S., New Orleans, La.

I am not "quibbling" about anything, nor do I want to put anything "across," I am merely stating that, as far as I can understand the English language; as far as I can correctly read the definitions given in our standard dictionaries, there can be no such thing as "preventive dentistry."

says Dr. McGill. Prevention of what, I would ask? Education may be "prevention" as he says, but it is not "preventive dentistry" by a million miles.

Dr. McGill closes his letter with the following paragraph:

"If you have a term that will fit this particular phase of dentistry, that will describe the end for which we work better than the term preventive dentistry, I will gladly accept it and work to the best of my ability to help you put it across. After all, our main object is to get dentists in general to give this thing more thought, and quibbling about a name for it will get us nowhere."

For my part, my dear doctor, I am not "quibbling" about anything, nor do I want to put anything "across," I am merely stating that, as far as I can understand the English language; as far as I can correctly read the definitions given in our standard dictionaries, there can be no such thing as "preventive dentistry," and the mere fact that scores or hundreds of dentists use the term in just their natural careless manner does not change the actual condition of things even a little bit. There is no "quibble" about that, is there?

There is a world-wide organization, the object of which is to prevent cruelty to animals. Had the organizers of this wonderful organization started out to operate under the name "preventive cruelty," would they have ever gotten anywhere? I should hope not! They would have been laughed off the face of the earth. Fortunately for millions of poor dumb animals, they adopted a name which *was possible* and meant something.

Talking of cruelty to animals, what do you know about this? Hambone said: "If dis yere nigger beats his mule he am put in

jail, but if de mule kicks de stuffin' out of dis yere nigger dey don't do nuttin' to de mule," which shows being a mule has some advantages after all.

But don't imagine, dear Brother McGill, that I expect for one moment that the legion who *say* that they are practicing "preventive dentistry" will change their vocabulary.

The truth is that dentistry is a new science, and its practitioners are new to the game and are not educated to the value of using correct terms. We know what we mean, and let it go at that.

Doesn't *everybody* know that the *dark shadow* (which is no shadow at all) on the film shows an abscess? If you don't believe it, turn to page 138 of one of the latest works on "radiodontia," which I assume is on your shelves, and there it is as plain as print can make it. *The arrow points to an abscess!*

Doesn't everybody know that "infection can be shown upon a film"? Why bless your heart, some time ago a lady came to me with a full set of films upon which her dentist had pointed out a raft of abscesses. When I suggested that we must go a little slowly, because the films did not really show abscesses, you should have seen her face change, and in a very few minutes she got enough of my talk and off she went, saying that she would call again.

Of course, she did not return. I lost my patient through my ignorance. She must have been sadly disappointed to find one who had been so well recommended to her, so densely ignorant upon the subject of the x-ray as not to recognize an abscess which she pointed out on the film!

And that's the way it goes. Tell me, Dr. McGill, don't people come to see you every day and talk of their *dead teeth,* and don't *you* know that these teeth are not dead, just as *you* know that the film does not show infection, and just as *you* know that the *dark shadow* does not denote an abscess, and just as you well know that there can be no such thing as *preventive dentistry?*

I wonder if Dr. McGill meant it as a joke when he termed Louis Ottofy, D. D. S., M. D., *a layman,* because it was from Dr. Ottofy's Standard Dictionary that I obtained the definition which he said was a layman's.

To my letter to Dr. Jordon, I received this reply: "In answer to your inquiry of Sept. 11th, I would say that *I believe* [italics mine] the chapter on Oral Prophylaxis in my book 'Operative Dentistry for Children' answers your question."

Turning to this chapter as we find that Dr. Jordon is very much "up in the air" upon the subject of preventive dentistry after all, because Dr. Jordon well knows that "polishing the teeth of her patients month after month with rubber cups and wooden shoe pegs" is *bona fide* dentistry and nothing else.

That this *month after month of polishing* is real dentistry and

nothing else, can be readily proven by the fact that while Dr. Jordon can take a young girl and soon train her to be a valued assistant at the chair, no matter how adept that young girl might be, Dr. Jordon, *under the law,* could not allow her to polish the teeth of one of her little patients. Isn't that a fact?

Why cannot Dr. Jordon teach this young girl to polish the little child's teeth and then set her up in an adjoining room and let her work that way all day? Just for one reason. The law says that such *polishing* is dentistry, not *preventive dentistry* mind you, but just plain dentistry, and the law says that no matter how competent that young girl might be, she must keep "hands off" of these little patients. If she wants to practice *this kind of dentistry,* she must either go through college and get her D. D. S., or, of late years only, go through a one (?) year course and obtain *a certificate*—and there you are.

Thus we see that while both Drs. McGill and Jordon "picked on me" by attacking my position as to the impossibility of "preventive dentistry," they have both failed to make good their contentions, as it is clearly to be seen that neither could produce "a concrete example of *preventive dentistry,*" and consequently have only aided my argument against the use of the term.

Permit me please, Dr. Jordon, to give you a few "concrete examples of *my endeavors*" in *dentistry.*

In 1883 a young girl came to me right from the hands of one of our old (at that time) dentists, who ranked well, but, unfortunately for his patients. he had practiced the method of running a separating file between the molars and bicuspids, thus leaving absolutely flat surfaces upon these teeth. Of course, *you* do not know what that meant, but it did mean a-plenty all the same. As a rule, such treatment spelled the early loss of the teeth, that's all.

My record shows that during a few months I filled eleven cavities for this young lady, and that there was not a single filling or decay in the four upper incisors or six lower anterior teeth. All the molars (save the thirds) and bicuspids and the distal surfaces of the upper cuspids had large fillings in them. *Get that, please.*

That young girl has been a patient of mine ever since and, incidentally, my wife as well, and, therefore, I became *absolutely responsible* for the welfare of her teeth, provided only that she followed my instructions to the letter. She certainly did take good care of her teeth day by day, and year by year—never neglecting them — and right along did I polish them, to the best of my ability, from three to six times a year, and as a result, today, forty-two years later, she has not a *single defect in any one of the anterior teeth as just enumerated.*

And notwithstanding those extensive fillings and slab-sided teeth of forty-two years ago, every one of those teeth is stand-

ing today, *and not a dead pulp.* One measly upper third molar lost without a spot of caries upon it has been the only casualty during all of this time.

I trust I may be pardoned for pointing with pride to such a case, *as showing what just plain dentistry will do.* What I did for this young girl forty-two years ago was anything but "preventive dentistry." I did the very *best real dentistry* of which I was capable, and through the ensuing forty-two years, I continued to give her the very best dentistry of which I was capable.

As for my daughter, starting at two and a half years of age, she had an appointment for a polish the first Saturday of every month right along for years. Later on, these visits were cut down to two or three a year as that was found sufficient. When my two grandchildren came along, it was the same old story. The sixteen year old granddaughter hasn't a flaw in any tooth today, notwithstanding the fact that she wore orthodontic appliances for seven years (I call that a pretty good record). The thirteen-year old girl erupted two lower first molars with microscopic defects upon their buccal walls. Today, seven years later, each of these molars carries a filling the size of a mosquito's foot, and otherwise her teeth are absolutely perfect. These are the goods that I deliver as *concrete examples of dentistry,* and you, Dr. Jordon, are asking Dr. McGee to *beg me to preach prophylaxis!*

Looking after the diet is not dentistry of any kind. Thousands of institutions employ "dieticians," many of them young women. Are they practicing dentistry of any kind? I reckon not.

Thousands of sufferers go to stomach specialists to be instructed as to their diet. Are they practicing dentistry? What an absurd question!

"Preventive Dentistry"—just another one of those meaningless terms—and meaningless though it is, it will still be used, and you, "dear reader," know why. Most of us would rather break a blood vessel than to admit we are wrong and change over to another tack.

I still maintain that preventive dentistry and preventive surgery are in one and the same class—an impossible class.

Let us assume that in the Smithsonian Institution there was to be found a *very interesting* specimen of some kind, all duly labelled and classified and indexed. Then, if, upon some bright day, someone came along and discovered that the labelling and classification and indexing were incorrect, would this *interesting specimen* lose its interest? Should it be removed and discarded? Hardly. Therefore, these men and women who imagine they are doing preventive dentistry, should "keep on keepin' on." They are doing a good work, irrespective of what *they* call it, but if some day they should reach that state of mind whereupon they could recognize that they are *practicing dentistry,* it would undoubtedly be much better.

"Reciprocity or Bust!"

Editor ORAL HYGIENE:

The subject of reciprocity seems to have taken the profession by storm. Now, let us all put our shoulder to the wheel and strive for that which will make national reciprocity a realization. "Reciprocity or Bust" is a good slogan.

I have always been an ardent believer in equal rights between the dental and medical professions to certain limitations, with particular reference to reciprocity, and never could quite understand why we as dentists and "American citizens" should be required to undergo examinations, needless red tape, expense and inconvenience before we can secure the legal right to practice in another state. Ell's bells! What's the difference between gold inlay on the Pacific Coast or a gold inlay over on the Atlantic Coast?

In a letter to editor of *Dental Facts* and which appeared in the July issue, 1922, page 98, of that publication, I suggested that the A. D. A. at their session in Los Angeles that year take up, for discussion, that subject of national reciprocity. That has been over three years. It's still being suggested. Put 'er in high, step on the gas, let's go.

J. G. ARBENZ, D. D. S.

Wheeling, W. Va.

"The Gateway to Health" Appears

The first issue of *The Gateway to Health* has appeared, carrying articles on dental subjects written by well-known members of the profession. The dedication is by Dr. C. N. Johnson.

The Gateway to Health, endorsed by Dr. Johnson, Dr. Sheppard W. Foster, president of the American Dental Association, Dr. A. C. Fones and others, seeks to interpret dentistry to the public at large, including the children.

The first issue contains several interesting articles, attractively illustrated. The journal is approximately the page size of *The Literary Digest.* The publishers suggest that members of the profession place the magazine upon their reception-room tables so that patients may have access to it. *The Gateway to Health* is published by S. C. Horn at 437 Lafayette St., New York.

Twentieth Century ETIQUETTE

By THOMAS C. BONNEY, D.

WITHOUT question the personal appearance of the dentist, his attitude toward his patients, and the skill with which he performs his work contribute in no small measure to his professional, and therefore to his financial success.

It is with the idea of giving to readers of ORAL HYGIENE some fit rules for attaining to that high estate of "positively the best dentist bar none, in this part of the country" that the following rules of etiquette are presented. The mere fact that they have proved of doubtful value to thousands, yes hundreds, of dentists in years past is no reason why anyone cannot give them a fair trial and thus decide for himself their merits and demerits.

The Dentist Himself

Shaggy hair, carelessly combed, with the neck wooly, is conducive to a leonine appearance that is bound to inspire the patient with a feeling of confidence. This is especially true if at the same time the face is covered with a two or three days' growth of beard. The patient will immediately think of the king of beasts and, recalling this animal's courage and fearlessness, will subconsciously ascribe to the dentist the same qualities.

The odor of synthetic gin on the operator's breath will tend to create in the minds of his patients the belief that he is a "regular devil," and the dentist can make a remarkable impression by voluntarily offering to give the name of his favorite bootlegger to any patient who appears to be visibly affected by the alcoholic emanations. This impression may be greatly strengthened by mixing with the breath of gin the odor of a stale stogie. If in connection with these the dentist is fortunate enough to be the possessor of a high-grade, active halitosis (see advertisement in any current magazine) he will have a combination that is unbeatable and the results will speak for themselves.

No sane patient objects to soiled hands being placed in her mouth. At least they should not because the mouth itself under the most favorable conditions is none too clean. However, ragged fingernails which scratch the patient's lips and cheeks are not considered *au faux;* although a little clean dirt beneath fairly smooth nails is not objectionable so long as it is not present in quantities sufficient to permit of

A satirical dissertation on practice-building methods, with a few hints regarding deportment.

For the Dentist

NNEY, D.S., Aberdeen, South Dakota

small particles becoming dislodged and dropping in the patient's mouth. When this occurs it is liable to create in the mind of the patient a desire to expectorate, and if this desire is acted upon it slows up the dentist, jars upon his refined sensibilities and, what is more important, knocks his efficiency for a row of Hungarian goulash containers.

A few overly-finicky patients object to cigarette stains on the dentist's fingers, but these with their accompanying odor can



The patient will immediately think of the king of beasts.

easily be disguised by painting the fingers with iodine, chromic acid, or mercurochrome 220 (soluble), and rubbing them with a raw onion. If the dentist objects to the odor of raw onion asofoedita may be used instead.

If for any reason it may seem necessary to wash the hands before attending to a patient there is no reason to overdo it. A little splashing around in the bowl will produce the necessary psychological effect which will be greatly enhanced by shaking the hands immediately afterwards and splashing water all over the patient. Wiping the hands on a soiled towel hastily grabbed from the basket is a cute little stunt that is never missed by the patient and is one that adds much to the general *ensemble*. It creates an atmosphere of efficiency and leaves with the patient an impression that is seldom, if ever, forgotten.

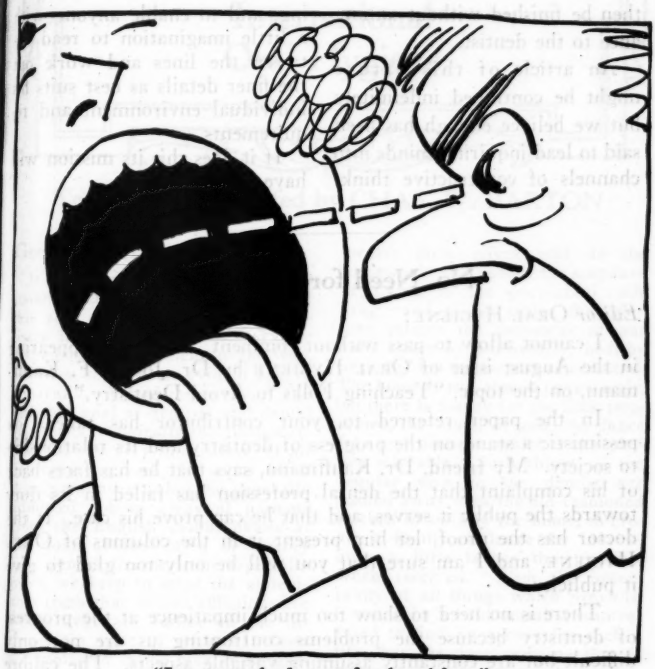
The Dentist's Clothing

There is little to be said regarding the clothing to be worn by the dentist in the operating room, and there are so many differences of opinion as to what is the appropriate gyration that any positive statement would appear dogmatic. There are several little suggestions however, that may prove helpful and that are worth passing along, one of the most valuable of which is the following gleaned from a close study of a recent number of *Judge*.

If, while awaiting the return of your other gown from the laundry the one you are wearing becomes dirty, simply smear your arms and neck with grime until they are several shades darker than the gown and the latter will then appear clean by contrast. This clever little wrinkle will also do much toward reducing the weekly laundry bill and taken together with the soiled towel idea mentioned in a foregoing paragraph, will pile oodles of efficiency around the office. If it is not convenient or practical to smear the arms and neck with grime, spots of dirt on the gown may be covered with a thin layer of plaster of Paris. Owing to the whiteness of the plaster it is not advisable to spread it on too thick or it will defeat the very end for which it is being used. Spots and splashes of blood may be nicely concealed by covering them with argyrol or pyorrhea astringent, and if neither of these agents is available red writing ink may be substituted. If expense is no object of course a clean gown can be put on as soon as the one being worn is soiled, but this is to be avoided at all hazards and an air of resourcefulness maintained above all things.

The Examination of the Mouth

If the patient opens her mouth too wide when you start to examine it you can get quite a "kick" out of smilingly saying, "You don't need to open your mouth so wide; I am going to stand right here on the floor." If this doesn't cause her to close her mouth to a point where it



"I see you had eggs for breakfast."

will be easy for you to work, the following bit of college humor will usually prove effective. Glance quickly into the patient's mouth and fix your gaze upon the patient's tonsils. After looking steadily at the tonsillar region for a few minutes look quickly into the patient's eyes and say (softly, and without too much emphasis): "I see you had eggs for breakfast." The effect will surprise you!

In taking radiograms of the teeth much time is often lost by stopping to bend down the corners of the film. Patients do not come to the office for service of this nature expecting it to be pleasant — so why disillusion them? The sharp corners of the film may hurt the mouth of the patient but she fully expects just that very thing. The pain may cause the patient to move around and so make it difficult properly to place the film in position, but a tactful remark such as, "For th' luvva Mike can't ya hold your face still?", or "How'n h— do ya expect me to get a decent picture if ya don't hold still?" will usually render the patient docile and the work can

then be finished without annoyance to the dentist.

An article of this nature might be continued indefinitely but we believe enough has been said to lead inquiring minds into channels of constructive thinking, and to enable anyone with a little imagination to read between the lines and work out the finer details as best suits his individual environment and requirements.

If it does this its mission will have been fulfilled.

No Need for Impatience

Editor ORAL HYGIENE:

I cannot allow to pass without comment, the article appearing in the August issue of ORAL HYGIENE by Dr. Joseph F. Kauffmann, on the topic, "Teaching Folks to Avoid Dentistry."

In the paper referred to, your contributor has taken too pessimistic a stand on the progress of dentistry and its relationship to society. My friend, Dr. Kauffmann, says that he has facts back of his complaint that the dental profession has failed in its duty towards the public it serves, and that he can prove his case. If the doctor has the proof, let him present it in the columns of ORAL HYGIENE, and I am sure that you will be only too glad to give it publicity.

There is no need to show too much impatience at the progress of dentistry because the problems confronting us are not only difficult but are constantly assuming variable aspects. The calibre of men who are practicing dentistry today, is not one whit inferior to that in the medical profession. If dentistry has not solved its problems, it is because they are problems which are very difficult to solve. Medicine has numerous problems, which are far from solution. Society is not casting aside the aid which medicine has to offer; on the contrary, it is taking full advantage of the constant improvements in medical practice. Just as a child learns to walk after a career of stumbling and tottering, so is dentistry moving forward at a pace, slow but sure, towards a goal, which though distant, is nevertheless not impossible of attainment. If we have patience, we must be rewarded. Someone has said that "Discontent breeds success and progress"; we have seen this proved true very often. We must not permit our discontent, however, to make us dyed-in-the-wool pessimists.

Very sincerely yours,

M. HILLEL FELDMAN, D. D. S.

Chief of the Dental Department of Lincoln Hospital,

New York, N. Y.

International Oral Hygiene

Translated and Briefed by CHAS. W. BARTON

Great Britain

It has been pointed out very persistently during the first months of this year that the demand for dentistry in the British Isles is on the decrease, a fact which, by the way, has been reported as evident also in Australia. While the eventual and ultimate goal of dentists and dental hygienists is logically the disappearance, in the very dim future, of all dentistry as such, it seems more than premature to lay the generally admitted ebbing away of patients from the English dental offices at the door of the dawn of victory over dental disease, quite especially when we keep in mind the undeniable truth that dental afflictions the world over are rather on the increase, in spite of what has been accomplished in the way of enlightening the people and helping them to some more or less rational mouth hygiene.

The Dental Surgeon of May 9th, 1925, holds that "the explanations—general bad trade and the poverty of the working classes—is not complete. The fact remains that the middle classes, from which the dentist should obtain a steady flow of patients, are spending millions on wireless sets and Morris-Cowleys, and are forsaking the dentist."

A similar view is expressed, in a more forceful manner even, by *The Ivory Cross Journal* in its leading article for March, 1925, where it says: "The reaction from the war has created a passion for pleasure, to which numbers of people sacrifice all that formerly was considered the elementary decencies of life and comfort. Men will live in poky little flats, and eat the scrappiest of meals; their wives will do the housework, and reduce the standard of living to the proverbial 'oile drag,' and all in order that they may relieve the monotony of our hard times by amusement, healthy perhaps, but by no means essential. The home is run almost penuriously, but there is money for the little two-seater, the round of golf, the dance teas and dinners, which make penury tolerable. Such things as the regular visit to the dentist are pushed away with the old-fashioned instinct to solidify the home, to create a family, to leave the inheritance a little larger than it was when received. With the uncertainty of all things which prevails, it would be a bold moralist who refused to find an excuse for such a life, but the fact remains that it exists, not only among the young, where it might be expected, but continuing in men of more than middle-age; and the reaction is felt among those who, under other conditions, would draw a living from money which is given to pleasure."

The Dental Science Journal of Australia (of July, 1925), from which the above notes were culled, remarks that "so far as dentistry is concerned, it is, of course, very unsatisfactory to the individual members of the profession that even a section of the public should prefer to neglect their teeth and thus prejudice their bodily health, but there would appear to be no way of overcoming the tendency other than by persistent propaganda in the direction of showing the direct relation which the teeth have on their general health."

The complexion put upon the situ-

ation by F. A. W. in the August, 1925, issue of *The Western Dental Bulletin* is original and interesting enough to justify our quoting it at length, particularly when we remember the long-drawn-out and bitter fight which the qualified dentists have waged in England against the "quacks" and won finally in 1921:

"The Dean of Windsor," says F. A. W., "in his address to the delegates attending the British Advertising Convention, said: 'Go ye into all the world, and preach the gospel to every creature. This was the gospel which justified the principles of the modern insistence on publicity. If we know that something is good and true, we are bound to see it propagated.'

"And this is the test which justifies dental propaganda.

"To the business mind, propaganda and publicity have but one meaning — advertisement, and advertisement on the intensive scale. Sir George Newman, K. C. B., Ministry of Health, at a conference between the Dental Health Propaganda Committee of the Dental Board of the United Kingdom and the representatives of various bodies interested in the education of the public in oral hygiene, desired to emphasize the word *education* rather than *propaganda*. He thought there was a difference, and it was desirable to concentrate on the former rather than the latter.

"Looking backward, through glasses which magnify slightly, what do we visualize in the years preceding passing of the 1921 Act? Handsomely painted shop fronts, brilliant electric lighting effects, enormous gilded lettering and palatial premises which fascinated the people, and day and night called attention to the fact that their teeth needed treatment; while the showers of seductively worded brochures and circulars scattered broadcast over the country by both mail and messenger, served as a constant reminder that teeth decay, and that no one save the advertising dentist could alleviate the pangs of toothache, by reason of his marvelous methods and painless dentistry!

"All this has ceased; the voice of the dental advertising charmer is silent in the land; the red and gold which once decorated, or disfigured, the front of his premises has vanished. The elaborate showcases, with their marvelous arrangement of colored electric globes and their amazing variety of highly finished dentures, are no longer visible; while the dental literature which served as a constant reminder of oral troubles no more issues from the printing presses of the country.

"It will be apparent to the man who thinks that this solemn hush, after the bustle and publicity of so many past years, must of necessity have caused a reaction—and it has. Is it to the good—or otherwise? The extremely ethically minded will at once say—'all to the good.'

"May we suggest that there are two sides to every question? In no instance is this more apparent than in this vital subject of dental advertising.

"The publicity of the old days, we are bound to confess, had *some* advantages, for it undoubtedly brought home to the lay mind the necessity for dental treatment; now, with changed conditions, the crying dental needs of the nation still obtain, and a boom of constant unremitting propaganda work, day in and day out, is from all points of view the one thing imperatively necessary.

"The dental advertising man of yesterday is complaining bitterly that, owing to the cessation of activities in his advertising, his practice has depreciated to such an extent that it barely gives him a living. The ethically minded practitioner must also be in somewhat similar straits, and is apt to wonder why; for it can hardly be gainsaid that the publicity paid for and promulgated by the advertising practitioner must have been, to a smaller or greater degree of benefit to the qualified man. We must admit this, though deprecating at the same time the methods used.

"Where do we stand today?

"A Propaganda Sub-Committee has been formed, and the *British Dental Journal,* in a recent editorial, sums up the situation as follows: 'That is what one comes back to: how to make the public aware of its own needs. A well-thought-out plan, if not actually organized by the Ministry of Health, yet directly under its aegis: a plan of action elastic enough to adapt itself to the requirements of different sections of the community—industrial agricultural, and so on; a plan necessarily bound up with the Board of Education in that department devoted to the physical well-being of the child; an avoidance of movements that clash or overlap; a co-ordinated plan linking together in one comprehensive scheme a whole range of methods, from the newspaper or wireless pronouncement to the concrete object lesson provided by statistics—showing vastly improved school attendance, and thousands of pounds saved by Friendly Societies—something of this kind, we believe, may be worked out by the committee entrusted by the board with the task. Such a plan it may take some time to develop, and we venture to think that it is more likely to meet with acceptance and success if it is not sought in the first instance to cover all the ground over which the campaign may ultimately be waged!'

"We are also given to understand that the Dental Board, as the result of the deliberations of the sub-committee mentioned above, have voted a sum of £4,000 for this year, and £5,000 annually, for the purposes of dental propaganda—sums unexpended in any one year to be carried in reserve. This sum seems to be inadequate; in the old days it is not improbable that some of the larger advertising dental concerns spent this amount on their individual publicity campaigns. In our minds, there is no doubt the sum allocated by the Dental Board will require to be augmented from other sources, and we would impress on all those interested in the betterment of dental health the need for their practical and moral support of the fund when occasion arises."

Sweden

Sveriges Tandläkare-Förbunds Tidning prints in its No. 2, 1925, two popular articles on the teeth and oral hygiene written by S. Karlström and Walter Stangenberg. These are the result of an undertaking started by the Swedish Dental Association in September, 1922. The pamphlets are meant for distribution for purposes of dental propaganda, but no definite arrangements as to the *modus operandi* can be found in the resolutions by the two dental societies of Sweden. Both have opened a new prize of 1,000 kroner for the best propaganda article on oral hygiene.

France

In the November issue of ORAL HYGIENE we have referred to the plea by Dr. Mussat for a broader view in the education of patients, as well as to Dr. Barail's article on the toothbrush in the schools published in a Paris daily. While the necessity for an instruction of the people in the precepts of oral hygiene and in the dangers of its neglect is well recognized throughout the country, there is still very little accomplishment in what is being done, and the press of the Gallic countries prefers rather to joke about anything connected with dentistry than to put a serious effort behind the surely well-meant educational efforts of the dental profession.

A write-up in the *Annales Politiques et Littéraires* of March 15, 1925, is particularly interesting for us, since it largely treats of the *Tooth Day* observed in this country. Jean Bastia expresses himself thus: "The United States have just been celebrating Tooth Day. On that day boys and girls parade the streets, armed with gigantic toothbrushes, reminding everybody that it is good hygiene to keep the ivory tools clean which Nature has placed

in our mouths for the necessities of nutrition, the attractiveness of the smile, and the tearing to pieces of our friends' reputations.

"But America is, above all, the land of gold teeth—those golden teeth which give so much value to the smile.

"Their surgeons, great virtuosos of the lever, kings of the forceps, pull willingly the vulnerable ivory in order to replace it with the inalterable metal. To live happily, as somebody said, one needs what?—A little gold in the teeth. * * *

"To come back to the Tooth Day of the Americans, it would be deplorable if such a day were celebrated in this country. One must beware of the solemnities. Lots of people, it is true, are celebrating all the feasts according to the ritual: they kiss on New Year's Day, are jolly on the Mardi Gras, malicious on All Fools' Day, patriotic on the Fourteenth of July, religious on All Saints' Day, and drunk every Christmas Day; but, besides these fixed dates, they hold no manifestations whatever.

"If one were to institute in France the Tooth Day, these people would brush their teeth only once every 365 days. And that is not enough."

The skit winds up with a slam at bootlegging in America *á propos* of dentifrices.

Such literature is undoubtedly amusing enough to be read, but runs very much counter to the serious efforts made by the dental profession. The untruths contained in such writings about the United States might leave us cold were it not for the fact that reprints by the *Revue Belge de Stomatologie* and *La Semaine Dentaire* are meant for the perusal of *dentists*, yet are never followed by a truthful resumé of the very real achievements in oral hygiene work in this country. We refer back to the criticism by those same Gallic countries of the Minneapolis Dental Week (see November, 1924, ORAL HYGIENE), and rather thought at the time it would lead to a repartee from some authority in this country.

While it may not be our immediate concern how far foreign peoples are being enlightened in questions of oral hygiene, the way in which the foreign dental professions are influenced in their mental attitude towards American dentistry seems to us to be of vital import to us, since it affects our dental trade abroad as well; and any depreciation of our trade is bound to affect also unfavorably the dental profession.

That the French dentists are striving honestly to do something in the way of getting an oral hygiene movement going in their country is evidenced by efforts such as the publication of popular pamphlets by Dr. L. Motte, of La Rochelle, reviewed in *La Presse Dentaire* (June, 1925), although their style and layout may be questionable. More practical in his suggestions is Ch.-L. Quincerot, who, in *La Semaine Dentaire* (No. 26, 1925), asks the manufacturers of dentifrices to distribute samples of their products among dental clinics, hospitals, schools, etc., not only because it would be the very best advertisement for them, but also because it would serve best to induce the people to start oral and dental hygiene.

If the space devoted to this department has been taken up entirely with notes on oral hygiene, propaganda in England, Sweden and France, it was done for the purpose of showing how these countries are grappling with the problem unsuccessfully because they are striving after general measures before the proper foundations have been laid in the profession itself; also for the purpose of showing, by contrast, how very much more has been achieved in this country, both by individual and organized effort.

The Stomatological Section of the A. M. A.

By ALFRED J. ASGIS, Sc.B., D.D.S., New York, N. Y.

THE official abolition of the stomatological section of the American Medical Association at the last annual meeting in Atlantic City is greatly to be regretted. Although this section has functioned for about forty years, its abolition has in no way affected the rapid development of stomatological activities in the United States.

Because of the discontinuance of the A. M. A. section, it leaves the American Stomatological Association as the only medical association which represents stomatological science in the United States. The Section of Stomatology of the A. M. A. was a member of the Association Stomatologique Internationale (A. S. I.) and thus had representation on the International Council.

As a result of the abolition of the Section, its members will be reprived of their affiliation and participation in international stomatology. Those members of the Stomatological Section of the A. M. A. who wish to retain their affiliation with the International Stomatological Association are advised to communicate with Dr. Alfred J. Asgis, Secretarie-General-Adjoint of the Association Stomatologique Internationale at 33 West 42nd Street, New York City. At the June meeting in Paris the A. S. I. adopted two of the proposals submitted by the American delegation of the American Stomatological Association:

(1) To admit to membership in the stomatological societies non-medically qualified dentists who accept the stomatological doctrine:

(2) Dentists who hold membership in stomatological societies will thus be afforded an opportunity to serve on the International Council and participate in the next International Stomatological Congress, to be held in Paris in 1927, during the celebration of the twentieth anniversary of the A. S. I.

The aim of the International Stomatological Association is:

(1) To establish stomatology, or the care of the mouth and teeth, as a specialty of medicine throughout the world, to be ultimately practiced by medically qualified dentists, that is, stomatologists;

(2) To enlist the co-operation of medically qualified dentists, non-medically qualified dentists, and medical practitioners to foster the stomatological

idea for the protection of public health;

(3) To invite dentists with no medical qualification, but who accept the stomatological doctrine, to join the stomatological societies of their respective countries.

The abolition of the stomatological section of the A. M. A. is not to be construed as minimizing of the importance of stomatology amongst the specialties of medicine, but on the contrary, it makes it clear, once and for all time, that a "Stomatological Section" must be differentiated from a "Dental Section."

In an editorial in the August, 1925, issue of ORAL HYGIENE, Dr. McGee comments on this point; he says: "The stomatological section was a duplication of the surgical section of the American Dental Association and its disappearance will not in any way obstruct the science of stomatology."

We take this opportunity to call the attention of the medical and dental professions to the present status of stomatology in the United States and its differentiation from dentistry, here as well as in Europe. Stomatology in Europe is a well-established specialty of medicine and the Association Stomatologique Internationale has, as I have said before, functioned as a medical association for two decades.

Specimens of Enamel

Dear Dr. McGee:

Would you please publish this request in an early issue of your magazine as it will assist me in carrying on the research work which I am at present engaged in?

I am in need of specimens of enamel which are removed from the teeth in the ordinary excavation and dressing up of the cavity. I would like any dentist who would care to send me such fragments of enamel from the teeth of patients about whom he could give a fairly accurate history, to communicate with me so that I might send him a few vials and questionnaire to be filled out with the specimens.

Thanking you for your co-operation in this matter and assuring you of my constant endeavor to be of service to the dental profession, I am

Fraternally yours,

M. J. EISENBERG, D. M. D.

436 Warren Street, Roxbury, Mass.

Editorials

REA PROCTOR McGEE, D.D.S., M.D., *Editor*
212 Jenkins Building, Pittsburgh, Pennsylvania

What is Your Diploma Worth?

THE years of hard study, loss of time from gainful occupation, expense of schooling and last, but not least, the using up of time that can never be replaced, are some of the things that go into the matter of securing a certificate of graduation, or, in short, a diploma.

Would it not be a good idea to have that diploma, after it has once been registered, act as a permit to practice anywhere? At least let it carry the privilege of reciprocity provided the owner has been an honest, progressive, ethical practitioner.

We all put enough time, energy and expense into our educations to have the right to practice under reasonable regulation in any state or territory.

The restrictive state laws in regard to practice were not made for the benefit of the people. They were made to keep you and me out so that those already on the ground could be disturbed as little as possible by new men coming into their field.

Personally I have all of the licenses I

will ever need so the sour grapes reply that I see coming doesn't apply.

So many states have examinations that are almost identical that it seems all of these examinations could be made uniform.

With uniform examinations why not general reciprocity based upon the desirability of the new man as a dentist and as a citizen?

Let the qualification after the first test be in line with proper professional conduct and progress rather than a set of questions and stunts suitable for a recent graduate.

Teeth and Baseball

NOW that Pittsburgh has won the World Series it might be well to let the world know why.

It was because the Pittsburgh crowd have better teeth.

You can't play baseball or any other athletic game without good teeth anymore than you can shoot ducks without guns or bows and arrows.

Philadelphia is trying now to get into the series for next year by requiring every member of the Philadelphia ball team to have his teeth put in perfect condition by his dentist.



Books

Reviewed by the Editor

Hand Atlas of Clinical Anatomy

By Eycleshymer and Jones

DURING the War a very remarkable manual on surgical anatomy was issued by Lea & Febiger and nearly all of those who had the good fortune to secure one of them said they wished there could be another printing.

This manual was the work of Dr. A. C. Eycleshymer, Dean of the College of Medicine and Director of the Department of Anatomy, University of Illinois, in connection with Tom Jones, anatomical artist, who is director of anatomical illustration and instructor of anatomy at the College of Medicine, University of Illinois.

Fortunately Lea & Febiger have produced a second edition, by these same authors, which is divided into four parts: the head and neck, the thorax, abdomen and pelvis, the upper extremity and the lower extremity and in addition it embraces female surgical anatomy which was left out of the previous edition.

Tom Jones is one of the cleverest, if not the cleverest, anatomical illustrator in America, and, in addition, he knows anatomy.

During all of the years of anatomical illustration it has been customary for the physician to get all the credit and glory and for the illustrator to have no mention. I realized this quite keenly because I paid my own way through medicine and dentistry by illustrating medical books and making anatomical books and models.

Such a thing as an artist in those days being allowed any credit was totally unheard of and unthought of and it was with lively satisfaction that I saw this joint work of the artist and the anatomist—for how in the world could we have even a semblance of a work upon anatomy without illustrations?

The drawings in this book are of the very highest type of art and their anatomical accuracy has not been surpassed.

Many of the same pictures are in the new book that were in the Military Manual and there are hundreds of others that were not in the previous edition.

There is only one drawback and that is that somebody has insisted upon naming the anatomical structures with some more or less excellent Latin names.

This book is intended to refresh the mind of the practical anatomist, that is, the surgeon, and as such the little exercise in digging up his long-vanished Latin is not so good.

It is sincerely to be hoped that eventually another edition will be issued in which the Anglicized names will be given and in the back where the present introductory index is located the Latin names could be given for those who desire to use them.

On the whole the book is invaluable to anyone who has occasion to refresh his memory upon human anatomy from the operative standpoint.

A Real Root Canal Study

WM. WOOD & CO., of New York have just published a work upon the "Anatomy of the Root Canals" of the teeth of the permanent dentition and the anatomy of the root canals of the deciduous dentition including the first permanent molars, by Dr. Walter Hess and Dr. Ernst Zurcher, both of the University of Zurich.

This is rather a large order for a very small and compact book, which has within its covers some of the most revolutionary information that has yet appeared upon the subject of root canals.

These two experimenters have divided the book between the root canals of the permanent dentition and the root canals of the deciduous dentition.

Dr. Hess made a long series of experiments in his effort to find some method of preserving for study the exact shape, size and relationship of the pulp and its various branches. He finally discovered a method of dissolving the pulp chemically from the tooth and then vulcanizing rubber into the canal finally dissolving away the tooth substance, which left him his rubber model an exact duplicate of the size and shape of the interior of the canals.

The book is, of course, profusely illustrated and those who will study the ramifications of these root canals will, I am sure, give up all hope of successfully filling more than 10 per cent of the most favorable cases.

The study of the pulp of the temporary teeth by Dr. Zurcher is almost a pioneer effort. The conclusions that he reaches in regard to the first permanent molar is of more than usual interest in that he states that the first permanent molar is actually a part of the temporary dentition which has become more highly developed, and takes its place as a sort of a *laision* between the temporary and permanent dentition.

This would explain many of

the difficulties we have had in preserving this tooth.

The book is well worth a careful consideration, both by those who believe they can fill a root canal and by those who believe they cannot. The pictures alone will settle many of the controversies that have raged over this subject for the last few years.

A Biography of Fonzi

LEA & FEBIGER of Philadelphia have published a biography of Giuseppangelo Fonzi, by Dr. Vincenso Guerini, who was a surgeon-dentist of Naples, Italy, dentist by appointment to the Royal House of Italy, University of Naples, and the author of many odontological works.

The story of Fonzi's life is extremely interesting. He was born in 1768 and accomplished a great deal for his profession; in fact, it is rather surprising to know that at that early date the practice of dentistry was as important a factor in the court life of the European kingdoms, as Dr. Fonzi made it. Those who are interested in dental biographies and in the romance and human interest of dentistry will find much in this little volume to repay them for the time spent reading it. Fonzi had conferred upon him many honors and decorations by the Czar of Russia, the King of Naples, the King of France, and the King of Spain. He practiced for a number of years in Paris, and when he traveled abroad he went in style becoming the Emperor of the east.

The author of this biography, Dr. Guerini, will be remembered as the author of one of our very best histories of dentistry.

A Constructive Worker

Editor ORAL HYGIENE:

While looking over the ORAL HYGIENE of October, 1925, I came across the pro and con for national licensing of dental surgeons and will state that I am one of those who favor your argument for national licensing.

In 1916 I sent out letters to most all the Governors and State Board Examiners of Dentistry in the United States, asking them to give me their opinion on this question; the replies I received show that three-quarters of them were in favor of it. I am still in possession of those letters and if you think they can assist this cause and you care to look them over I can mail same to you.

Sincerely,

SAMUEL LIEBLING, D. D. S.

599 West End Avenue, New York City.

Laffodontia

If you have a story that appeals to you as funny, send it in to the editor. He *may* print it—but he won't send it back.

HE: "I really wish you wouldn't knit when I'm eating, dear. It's quite impossible to tell where my spaghetti ends and your jumper begins!"

"What induced you to steal this case of whisky?"

"I was 'ungry, sir!"

"Mr. Strudelspiker, I'd like to marry your daughter."

"You couldn't give my daughter the luxuries she's accustomed to."

"I could change her name—that ought to be worth something."

"Father, is it true that big fishes eat sardines?"

"Yes!"

"How do they get them out of the tins?"

NANETTE: "What would you give to have such hair as mine?"

LIZETTE: "I don't know. What did you give?"

"Did you notice the baby face that woman has?"

"No; but I noticed the baby dress she's wearing."

VISITOR: "What nice furniture!"

LITTLE RONALD: "Yes, I think the man we bought it from is sorry now he sold it—he's always calling."

Before I marry a widow
This truth I will confide
I want definite information
On how her husband died!

BASHFUL SWEETIE: "Would you consider it improper if I kissed your hand?"

A REAL FLAPPER: "No. But it would be so out of place!"

SHE: "My musical education has been a great expense."

HE: "Indeed? Some one sued you, I suppose."

SHE: "There was a time when you liked to lovingly pet my chin."

HE: "Yes, but you only had one then!"

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PROPHYLACTIC TOOTH POWDER

Dissertations on Dentistry

by M. L. Rhein, M. D., D. D. S.

(*Continued from November*)

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CHAPTER II—PERIODONTOCLASIA



From this we pass to consider the more serious toxic activities in the digestive tract, of which ptomain toxemia is a good example. In such cases a degree of stomatitis starts up, the severity and symptomatology of which is dependent upon the nature and activity of the toxins.

The pyorrhetic condition of the mouths of sailors in extreme latitudes who lack proper amount of vitamins in their food content has been graphically described by all kinds of writers. Notwithstanding this, forty years ago infantile scorbutus was not known to the internist. Children by the score died in great agony from this condition of virtual starvation. "Died from rheumatism" was the physician's inscription on their death certificate. Never have I seen such terrible destruction of dental tissues as I saw in those days of child starvation. The following case published by me in a discussion of a paper by E. C. Kirk on Infantile Scorbutus should be very enlightening:

(*To be continued*)

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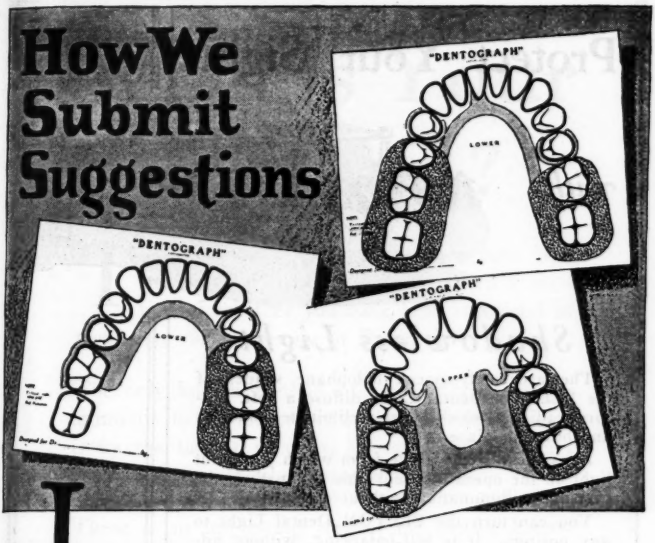
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THE ANNUAL INDEX

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(Space contributed by ORAL HYGIENE)

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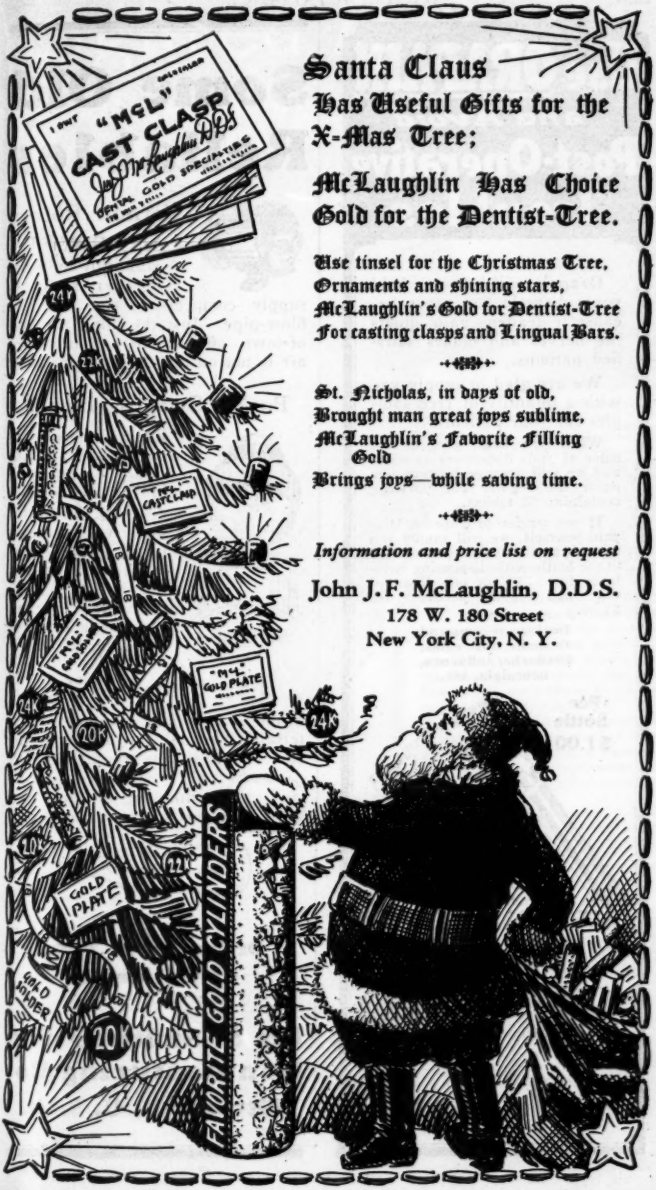
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A staunchly built device ever ready to supply compressed air for your blow-pipe. Just the thing for out-of-town offices where compressed air is not on tap. *Price* $9.00

Parker Swaging Device





Eliminates the counter-die and will swage a plate on a plaster die without crushing the plaster and will make a metal plate fit better than is possible by any other method. *Price*, complete with shot for swaging, $8.00.

Jiffy Cement Tubes

Made of a flexible water-proof material. The only method of filling root canals if you would eliminate air "cushions." *Price*, with long or short tips, box of forty, 60c.





Order from your dental dealer

Lee S. Smith & Son Manufacturing Co.

Pittsburgh, U. S. A.

Lighted by Radio

and what this means to Williams quality



An electric bulb held in the hand will light when placed in the pathway of the current that is "broadcasted" into the Williams Radio Furnace

HERE is a simple illustration of the principle of the Williams Radio Furnace. When metals are placed in a cold crucible with no heat inside or outside of it, they establish a contact with the "broadcasted" current, just as the bulb held in the pathway of the same current is caused to light.

This current melts and vigorously stirs the molten metal thousands of revolutions a minute, preventing segregation and producing a homogeneous alloy every time—something that could not be done by old methods.

Both the melting and casting is done in vacuum, preventing oxidation and blow-holes. For perfect results insist on Williams Gold—melted by radio.

THE WILLIAMS GOLD REFINING CO.
Smelters and Refiners
2978 Main Street, Buffalo, N. Y.
Bridgeburg, Ont.

Williams Golds

Melted by Radio

Casting Gold Lingual Bars Filling Golds
Plates Shells Wire Solders Clasps Nuggets

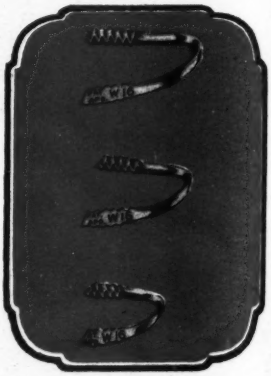
(See announcement on reverse side)



Of course she's pleased

her dentist used a

Williams
Ready Made
Lingual Bar



SCRAP GOLD

This is the month to send in your accumulation of scrap gold, filings, sweeps, etc. ***Our Motto*** — 100% returns; a fair charge for our work.

You can ship through your dealer or direct. Wrap your packages securely.

THE WILLIAMS GOLD REFINING CO.
Smelters and Refiners

2978 Main Street
Buffalo, N. Y.

Bridgeburg
Ontario

Williams Golds
Melted by Radio

Casting Gold **Lingual Bars** **Filling Golds**
Plates **Shells** **Wire** **Solders** **Clasps** **Nuggets**

(See announcement on reverse side)



Why we spend money to *give* you SODIPHENE

Sodiphene is accepted generally as an excellent antiseptic-germicide for Post-operative or Extraction pains.

The germicidal quality destroys chance infection—while the phenol analgesic quality relieves pain and soreness and gives comfort to the patient.

With infection prevented, Nature is free to heal rapidly.

MONTH after month here in ORAL HYGIENE we print the offer to send you a gratis professional package of SODIPHENE.

We are not anxious to distribute these packages broadcast to the profession—sending SODIPHENE to dentists who have manifested no interest in it. But we *do* wish to present a professional package to every man who seeks an antiseptic or a germicide better than he has previously encountered — to every dentist who, hopeful of discovering valuable new qualities, send us our coupon or his card.

Sodiphene

TRADE MARK REGISTERED

"First Aid for the Family"

THE SODIPHENE CO., Kansas City, Mo. OH-12

Please send gratis professional package to:

Dr.....

Address.....

This fine metal denture

with the periphery accurately reproduced in vulcanite



PALLADIUM Gold"—palladium-bearing gold, our new metal for dentures, looks like platinum and is lighter than platinum. It is a combination of 84% 24 kt. gold and 16% palladium; it is as strong and as durable as fine steel—it is non-oxidizable and permanent.

"Palladium Gold" is particularly indicated for acidulous mouths because of its entire freedom from base components. A Swaged-Pressed denture, made from "Palladium Gold," with the periphery accurately reproduced in vulcanite is, we think, the finest metal denture yet conceived.

The "Palladium Gold" Denture is made with Trubyte teeth and carved gums in any rubber desired. Periphery is accurately reproduced in vulcanite. The "Palladium Gold" includes the ridge.

A full upper or lower for the average mouth—

$37.50

complete

USL

UNION SQUARE DENTAL LABORATORY, Inc.

One Union Square, New York City

Send your card for interesting information—or a postal will do.

SUCCESS
IN DENTISTRY

depends upon

PROFESSIONAL
ABILITY

CORRECT
BUSINESS
METHODS

MODERN
EQUIPMENT

If it's Ritter — it's Right

Ritter Equipment is Modern Years after the Purchase Price Has Been Forgotten

RITTER

Dental Equipment

RITTER DENTAL MANUFACTURING COMPANY
INCORPORATED
ROCHESTER, N. Y.

Crescent says:

"Merry Christmas!"

December closes Crescent's twenty-fifth year. 1926 starts our *second* quarter century.

We are grateful for our growth—grateful to the dental profession which has helped us grow since 1900.

So our "Merry Christmas!" is a sincere and hearty greeting.

We keenly realize our dependence upon the profession and promise to do our level best to deserve your friendship and faith in 1926 and the years to come—to deserve it by making CRESCENT products the best we can, by fairly pricing them and by thinking ahead — thinking ahead, to improve the things we sell whenever we can.

If you're not acquainted with Crescent, send your card for interesting literature.

Crescent Dental Mfg. Co.

Manufacturers of Crescent Broaches since 1900.

2214-2218 South Sawyer Ave.

Chicago, Illinois.

PEBECO

REG. U. S. PAT. OFF.

TOOTH PASTE

maintains the salivary secretions at their normal level, thus affording the highest degree of

ORAL HYGIENE

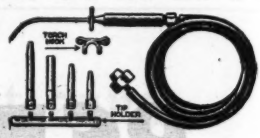
Samples on Request

LEHN & FINK, INC.

BLOOMFIELD, N. J.

A Division of

Lehn & Fink Products Company



Gives an almost ideal flame

TORIT TORCH 36 gives just about the proper heat. Where city gas is not available this Torch is a tool you need—in fact, it would seem pretty difficult to get along without it.

Every dentist who wants the most nearly ideal flame, for gold melting and soldering, needs TORIT TORCH 36.

This is only one of the several items of TORIT Gas Apparatus; we'd like mighty well to have an opportunity of telling you about the things we make. It just takes a minute or so to fill in the coupon, or to send your card or a postal; it puts you under no obligation, and if you're as pleased with TORIT Apparatus as the many other dentists are you'll be glad you went to the slight trouble of writing us.

St. Paul Welding & Manufacturing Co.

179 W. 3rd St. - - - - St. Paul, Minn.

Buy from your dental dealer

Torit

ST. PAUL WELDING & MFG. CO., 179 West 3rd St., St. Paul, Minn.

Please send data about your TORIT TORCH 36 and other TORIT Apparatus for use with city gas or Prest-o-lite.

Dr.....

Address.....

Dealer.....OH 12

A sample speaks louder than words---

If a brother dentist advised you to use DIOXOGEN in your pyorrhea and pus cases you would probably do so—you would not care just how this advice was worded nor just what he said, but just because it was a brother dentist you would probably follow his advice.

Brother dentists are constantly writing us words of praise about DIOXOGEN—they do not give any reasons why DIOXOGEN is better than anything else they have ever used, but they just say it does such good work.

As manufacturers of DIOXOGEN we know why it is so good and will gladly tell you, but what would be more convincing, would be for you to try it for yourself. It's what DIOXOGEN does that interests the dentist and a sample speaks louder than words.

We would send it if we knew your name and address. Write while it is fresh in your memory.

The Oakland Chemical Company

59 Fourth Ave. **New York, N. Y.**

CUTWELL

Buy Cutwell Burs from your regular dental dealer

To protect you against unscrupulous selling tactics; to assure you of the genuineness of the product you buy; to offer you an opportunity for redress in the event you are dissatisfied—Cutwell Burs are shipped only through established dealers in dental supplies. Let your dealer show you the economical way to buy burs. Let



All-rubber!

The R & R Hi-Lustr Tooth Brush and Gum Massager (with detachable head) strikes a new note in the program for oral hygiene. Here is a brush which is always sweet and clean. You can take it apart and clean it. There are no animal bristles of doubtful sterility; no chance to rub infectious matter into the gums no matter how vigorously one massages. Get your Hi-Lustr from your dealer. Give it a real trial!

BURS



Let us mail you a sample package of the fastest - cutting burs you ever placed in your handpiece.



This sketch illustrates R & R's shipping department, where Cutwell Burs are shipped to fill the orders of dental dealers. This is the twelfth advertisement in a series on the manufacture of dentistry's finest burs.

his salesman have your order for your first gross of Cutwells—you'll never regret it. Meanwhile, request your sample package which awaits you. Know, first hand, why they are dentistry's finest.

The Ransom & Randolph Company

TOLEDO-OHIO

MIZZY PRODUCTS MAGNIFY PROFESSIONAL SKILL

HEATLESS WHEELS

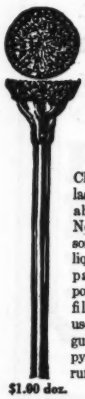
With the Metal Hub



CUT FASTER
RUN TRUER
Heat LESS

Do not Develop Humps and Bumps

But wear true until worn down to the metal hub



Bloody Nuisance Averted

Hakins Cleaners

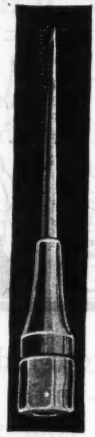
Clean teeth without lacerating gums or abrading enamel. No spattering; absorbs and carries liquid, powder or paste. Ideal for polishing inlays and fillings. May be used for massaging gums in cases of pyorrhea with engine running on low.

$1.00 doz.

The Only Real Advance in Hypo. Needles in 50 years

CONICAL

STRONGEST
MOST SERVICEABLE
MOST ECONOMICAL
Needle in the World



"IT'S HELL WHEN A NEEDLE BREAKS"

The Conical Needle May Bend—It Will Not Break

No Washers
No Leaking
Non-Corrosive

"ALL GUAGES IN ONE"

Boil it and use it again

A dozen Conical Needles will do as well and last as long as a gross of the usual kind

SCHIMMEL, HUB AND COOK TYPES

$2.00 per Dozen

Time Tells the Story



CRESCENT ALLOY

The Tooth Saver

30 YEARS OF SUCCESS

"Amalgamated by its might. Rejoice, it makes the whole world bite."

Superior Edge Strength

$2 per oz. Bottle
$9 per 5 oz. Jar



The Live Wire in the Dentistry of Childhood is

FLECKS RED COPPER CEMENT

Saves Deciduous Teeth

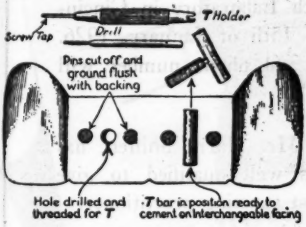
MIZZY PRODUCTS ARE SOLD AT ALL DENTAL DEPOTS

MIZZY, Inc., One Union Square, New York

MIZZY PRODUCTS MAGNIFY PROFESSIONAL SKILL

EVERY DENTIST NEEDS IT!

Repairing Broken Bridges Made Easy



The Jackson Bridge Repair Outfit is the most practical device for repairing broken pin facings and affords a labor-saving method which every dentist may successfully employ.

Write to-day for leaflet giving full description and directions.

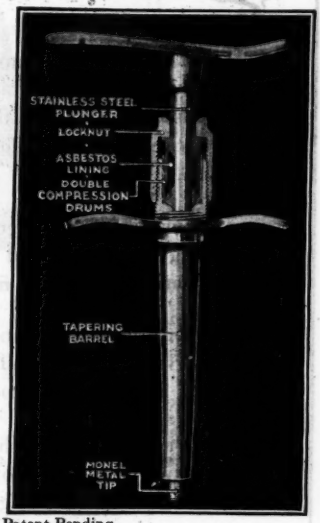
The best cement is never too good for the patient

FLECKS
OXYPHOSPHATE OF ZINC
CEMENT

IS THE ACME OF CHEMICAL ACCURACY

It is inseparably connected with good dentistry

KANT-LEEK



Patent Pending

"I have used Kant-leek Syringe for at least

5000 EXTRACTIONS

without losing a drop of the solution by leakage"

extract from one of many letters from enthusiastic users

Every day this Syringe justifies its name in the hands of thousands of dentists.

The double compression drum makes it non-leakable.

Made in Four Pieces — No Washers

Sterilizable · Stainless Steel Plunger
Long Wearing Threaded Tip

$6.00

MIZZY PRODUCTS ARE SOLD AT ALL DENTAL DEPOTS

MIZZY, Inc., One Union Square, New York

Special Announcement

The Lochhead Laboratories, Inc., beg to announce that they will open a branch Laboratory in Cincinnati, Ohio, on or about the 15th of January, 1926. Due notice of the location and phone number will be given.

The manager in charge, Mr. Harry Sniffen, has had long experience and is well qualified to give results satisfactory to the most exacting practitioner.

We are an organization of competent Ceramists, able to visualize from our models just what nature requires, and able to reproduce it.

With a knowledge of the Lochhead indirect method and mutual cooperation of the Laboratory with each and every Dentist, will give his patients results that any expert dental practitioner would be proud of.

Literature sent on request.

The Lochhead Laboratories, Inc.

Ceramist to the American Dental Profession

New York, N. Y.
115 West 45th St.

Boston, Mass.
120 Boylston St.

Chicago, Ill.
25 E. Washington St.

Los Angeles, Cal.
512 Hillstreet Bldg.

Announcing



Four Motors In One!

HERE'S the greatest step forward ever made in Dental Lathe construction. A universal motor that gives you a choice of four speeds, with *constant* and *equal* power at all speeds. Operates equally well on both alternating and direct current.

Dentists agree that the new D4 Dumore Constant Speed Dental Lathe represents the biggest value ever offered the profession. Many exclusive refinements make your work easier, and increase your profit from laboratory work. Completely equipped to handle any job.

Yet the cost is surprisingly low.

WISCONSIN ELECTRIC COMPANY
32 Sixteenth St., Racine, Wis.

DUMORE

Constant Speed
DENTAL LATHE

Mail the Coupon Now!

Wisconsin Electric Company
32 Sixteenth St., Racine, Wis.

Without obligation, please send full particulars regarding the new D4 Constant Speed Dental Lathe, and advise nearest source of supply.

Name .....

Address .....

City ..... State .....



Just what *are* Goat Feathers?

As an old colored preacher said: "They is somethin' which just obfusticates yo' vision: in sho't, they is somethin' which ain't." Something, which when looked at in the proper light transforms itself into something entirely different.

Some dentists merely "clean teeth" and look upon it as a sort of necessary evil. They make very little out of it but the work involved.

On the other hand, more and more dentists are doing prophylactic work. They are making money out of it and adding patients.

They have found out it pays bountifully to buy the right kind of prophylactic accessories.

Here are some of Young's Specialties

which have been enabling thousands of busy dentists to turn their prophylactic work into a highly profitable feature of their practice, because of the immense amount of time they save, and the satisfaction expressed by their patients.



YOUNG'S POLISHERS
YOUNG'S MANDRELS



BS POLISHERS
YCO MANDRELS



also

Young's Aseptic Broaches Young's Rubber Dam Holders
Youngs Copper Canal Points

There is an interesting booklet describing Young's Specialties and their uses. It will pay you to send for it—it's free. Young's Specialties are sold by all reputable Dental Dealers and Salesmen.

YOUNG DENTAL MFG. CO.

4958-60 Suburban R. W. St. Louis, Mo.

ABSOLUTELY PURE GOLD

U. S. Mint Service.
Form No. 613 A.

SPECIAL ASSAY SLIP.

Gold Deposited at the U. S. Assay Office at New York,

No. 504 Apr. 7" 1909

By Edward Rowan for Special Assay.

DESCRIPTION	GROSS WEIGHT OUNCES	GROSS WEIGHT DEC.	FINENESS GOLD 1,000ths.	FINENESS SILVER 1,000ths.	VALUE
Sample		64	1.000	—	$

Assayer.

MADE BY EDWARD ROWAN, INC.

The above illustration shows the result of a United States photographic Government Assay of a sample of **ROWAN GOLD,** being a reduced photographic facsimile of the original Assay Slip now in our possession.

The gold from which this sample was cut and submitted was not a peculiarly treated small quantity prepared for the special purpose of the assay, but a strictly typical specimen of **Rowan Gold** as made and prepared by Rowan Double Refining Processes for the manufacture of Rowan's Extra Pliable Filling Gold. The Certificate is, in effect, an Official Indorsement of the perfection of Rowan processes and the purity of Rowan products. No other proof is necessary to establish the claim that

Rowan's Extra Pliable Gold is the very finest and purest filling material that dentists can obtain.

Send for Trial Bottle $1.25 "E. P." Gold Rolls.

All other Rowan preparations are made with equal care and skill, and dentists who use them can confidently assure themselves and their customers of uniformly satisfactory results. Particular attention is invited to the Rowan Casting Golds and special Denture Golds, Decimal Plates and Solders, and Gold and Platinum Inlay products.

Our Gold Plates and Gold Solders are of such superior working quality, and finish as to assure the Dentist and his patients of perfect satisfaction.

EDWARD ROWAN, Inc.

Established 1878 Incorporated 1908

625 East 163rd Street, New York

OUR TRADE MARK



ON ROWAN PRODUCTS

If your Dealer cannot supply you, order direct from the Factory.

Do Your Plates Fit?



Most dentists try hard to get a good impression, then kill all chance of a fit by using a poor separating fluid.

Practically all of the old-style separating fluids are in the form of some kind of varnish.

Or-O-Fine Separating Fluid

is not a varnish; it positively does not change shape of model. It is extremely inexpensive.



Plates Fit

One 60c package makes a quart of liquid. All you furnish is the water. Bottle it up and keep as long as you wish.

Pour some in bowl and dip impressions to save time.

PRICE 60c

Or-O-Fine Products are Different

Or-O-Fine Devitalizing Fiber

stops toothache; it is odorless and colorless; it will not discolor teeth; results are positive. It is as different from other devitalizing agents as day is from night.

PRICE $1.50

Or-O-Fine Root Canal Filling

is especially adapted to those small, tortuous canals where it is practically impossible to remove all the contents.

No pain, no irritation after tooth is sealed.

The liquid is an ideal agent for putrescent canals, simply seal it in for a day or so. After one trial you will have no doubt about results.

PRICE $1.50

Do not confuse these products with others you have used. We want to emphasize the fact—*they are different.*

THROUGH YOUR DEALER, OR DIRECT

Or-O-Fine Company

247 West 42nd Street **New York**



"Tuesday at 3:00 P. M.

that's the only time I can give you, for my book is entirely full."

And when Tuesday comes will you have to wash a glass, for instance, to hand the patient for rinsing, or will you instantly get a LILY Cup, fresh, clean, 100% sanitary from the LILY Cup Container?

With LILY you are saving time, and getting the next patient into the chair more quickly. Isn't that in every way desirable and worth while?

PUBLIC SERVICE CUP CO.,
Bush Terminal No. 20, Brooklyn, N. Y.



A GOOD MOVE TO MAKE

Write your dental supply dealer's name on back of your card and mail to us today for a generous supply of LILY *Cups.*

Make us prove it

We reiterate that slight changes of process which in no way have altered the formula or chemical composition of SMITH'S COPPER CEMENT, have made it the most adhesive crown, bridge and inlay cement ever offered to the dental profession.

This is important because the frequent use of removable bridge work, and the large number of inlays now being inserted, have placed greater responsibility upon the cementing material than ever before.

The tendency to erosion of enamel under cemented bands, to say nothing of the necessity for protection of all work from bacterial invasion, makes a non-discoloring germicidal cement almost a necessity. In every case you can use

Smith's Copper Cement

Now make us prove this statement, at our expense. Fill in the coupon on the opposite page and mail it to your dealer.

Here's the way to do it

at our expense—

Free offer

Regular Full Portion Package Smith's Copper Cement Value $2.00

Send this order to your dealer. He will forward it to Lee S. Smith & Son Mfg. Co.

Dealer..... Date.....

Address.....

Please have Lee S. Smith & Son Mfg. Co., Pittsburgh, send to me free of all charges, one Regular Full Portion Package of SMITH'S COPPER CEMENT, on the following conditions:

1—I will use this package promptly to determine the correctness of their assertion regarding its wonderful adhesiveness and working qualities.

2—If this trial package does not prove equal to their claims, I am under no obligations whatever, except to notify you of my disapproval.

3—If, however, in my opinion, Smith's Copper Cement does verify their claims, and you receive from me no instructions to the contrary within 60 days, you may consider this a definite order for one regular six-four assortment containing six full portion powders and four liquids, list value $10.50, for the regular price, $8.00.

Dr. .....

Address.....

Order Accepted:

Dealer.....

.....

HOODS GOLDS

The price consideration is always outweighed when quality is placed on the scales———



Get The Gold You Pay For

JOHN HOOD COMPANY
178 TREMONT ST., BOSTON

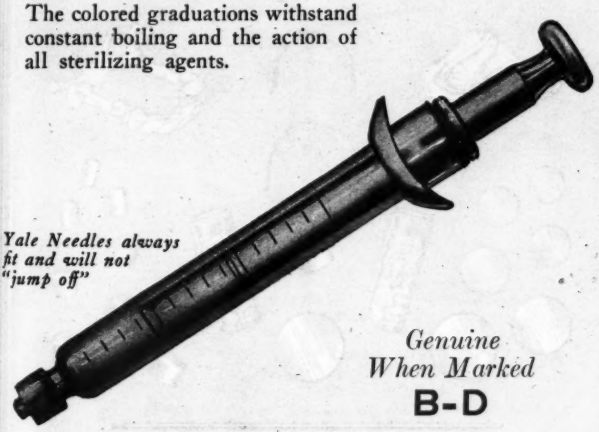
B-D PRODUCTS

Made for the Profession

LUER-LOK POSNER DENTAL SYRINGES

Genuine Luer, B-D Syringes now have Indestructible Scales and are accurately calibrated.

The colored graduations withstand constant boiling and the action of all sterilizing agents.



Yale Needles always fit and will not "jump off"

Genuine When Marked **B-D**

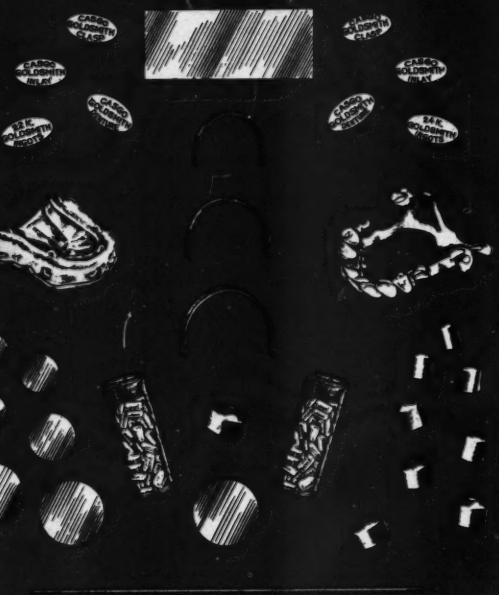
Sold Through Dealers

Becton, Dickinson & Co.

Rutherford, N. J.

Makers of Luer Dental Syringes, Asepto Dental Syringes, B-D Water Syringes and Dental Needles.

A Precious Metal for every Dental Requirement

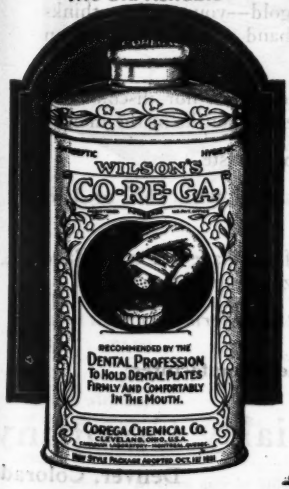


GOLDSMITH BROS. SMELTING & REFINING CO.
29 East Madison Street (*Established 1867*) Chicago, U.S.A.

WILSON'S

CO-RE-GA

"The Old Reliable"



TEAR OFF COUPON AND MAIL IT —NOW— FOR A GENEROUS SUPPLY OF TRIAL CANS GRATIS

Dr.

COREGA CHEMICAL CO. CLEVELAND, OHIO OR MONTREAL CAN.

Denspeco Non-Corrosive Bands



Either Hard or Soft

Better than a Copper or Aluminum Band at the same price as a copper Band.

(1) In Color—the color of gold—your patient thinks you are using a gold band when you take an impression.

(2) Does not discolor in the mouth nor discolor the teeth if left for days or even months in the mouth.

(3) Does not have that coppery taste.

(4) You can solder to this band with 16K or 18K gold solder.

(5) It stretches like gold. If you have a Taylor Band Stretcher only a few sizes necessary.

Specify Hard or Soft in ordering from

Your Dealer or the Manufacturer

The Dental Specialty Company

1638 California Street **Denver, Colorado**

Preventive Dentistry

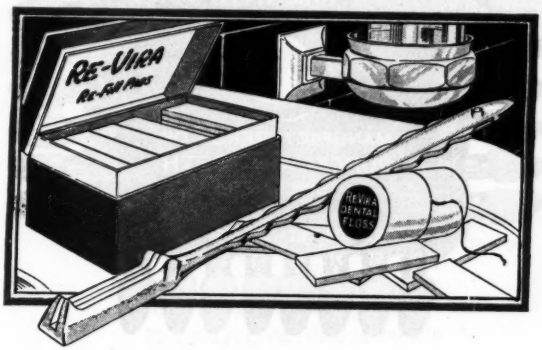
Dentists agree the gums must be massaged every day to keep them firm and healthy. Dentists who have seen

RE-VIRA

say it is the ideal massage brush because it is always sanitary and will not scratch, infect or re-infect the gums. Dentists also recommend RE-VIRA for cleaning and polishing the teeth because it gives a surface on which to use your polishing agent or dentifrice.

"The germs of pyorrhea left on the brush today are re-inoculated into the gums tomorrow" does not apply to RE-VIRA.

When you prescribe RE-VIRA for your patients with spongy bleeding gums or pyorrhea, you know there is no danger of infection, for they use a new cotton filler each application.



THE RE-VIRA CO., RIDGEFIELD PARK, N. J.

PRICES:

Adult's ... $1.00

Child's 75c

Complete with box of cotton refills.

☐ Enclosed find 25c for one Re-Vira.

☐ Enclosed find $1.00 for four Re-Viras.

Dr.....

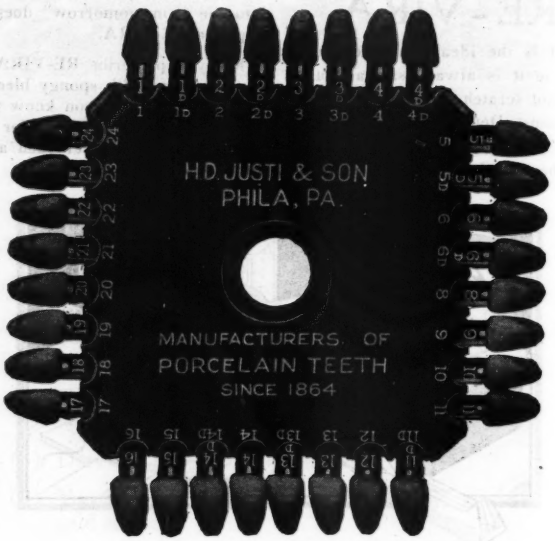
Address.....

Druggist..... Address.....

Brushes may be billed through dental dealer.

Indispensable

The New Justi Shade Guide



This Guide containing the famous Justi shades, in most convenient form, should be in the hands of all users of Justi Teeth. It will be sent in exchange for the old-type Justi Guide, direct from our factory.

The New Gold Pin Tooth

"Pinoro"

Approved True-To-Nature molds, famous Justi shades; porcelain of superior strength, translucence and depth of texture.

INDORSED BY

Prosthetists and Laboratories

The anterior molds have recently been perfected, and seven posterior molds added, meeting every practical demand.

Gold Pin True-To-Nature Teeth

Per set of 6 - - - - $1.02
Per Set of 8 diatorics - .40
Combination set of 14 - $1.42

Announcement regarding the Justi Ekloform Vulcanite Teeth will be made in the journals for January.

ASK YOUR DEALER FOR JUSTI
PRICE LIST, OR WRITE TO US

H. D. JUSTI & SON

Manufacturers of Porcelain Teeth Since 1864

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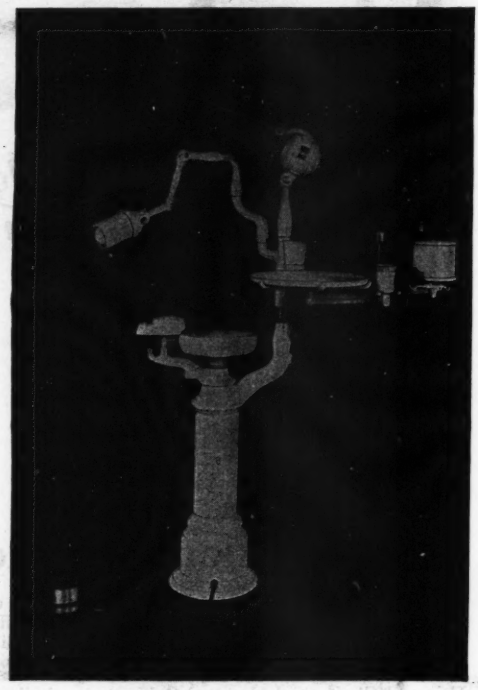
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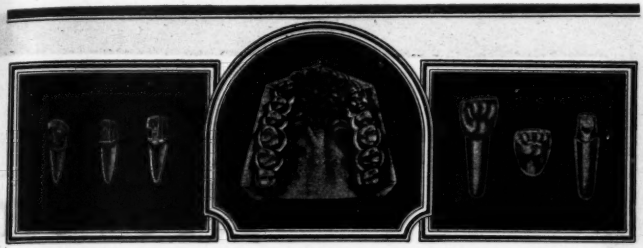
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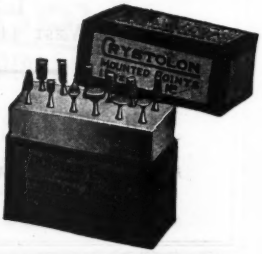
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If annoyance and pain you
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CASE HISTORY No. 936

"*Kentos Treatment*"

Following is a typical case history of Trench Mouth, showing the rapid recovery of the tissues following the Kentos Treatment:

"Mr. J—., an executive of one of the automobile associations of California, came to my office suffering with a severe case of Trench Mouth. Gingival tissues were so inflamed and swollen that he had eaten nothing but liquid food for four days. Tissues covered half the crown portion of the teeth, with swelling more pronounced in the anterior part of the mouth. Bled at the slightest touch, part of the mucosa having already sloughed away, and there was no tone to them at all.

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"**Two days later:** Swelling reduced to a considerable extent and inflammation practically gone. Scaled the teeth as far as I could without too much irritation. Repeated cotton roll treatment with 50% solution of Kentos No. 1.

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"Have had results short of marvelous with Kentos and can heartily recommend. I consider my success with Kentos largely due to the fact that my patients have been very faithful with their home treatments with Kentos No. 2, which I prescribe."

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That is the verdict the dentist always pronounces, when he views the rosy, health-like glow of nature always achieved in his veneering work by using

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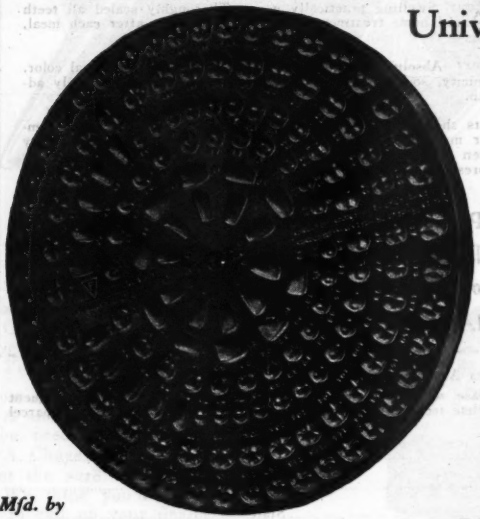


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160 Upper & Lower *Impressions*

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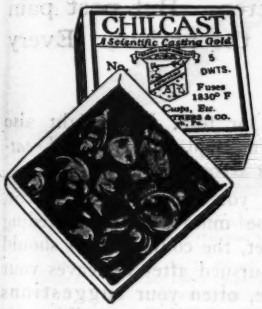
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Dr. .....

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It will pleasantly surprise you by its efficacy in bringing diseased pulps back to health.

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Jodo-Formagen is a bland and healing Pulp Preserver and Nerve Capper. It is an ideal remedy for the treatment of exposed or inflamed pulps, as well as hypersensitive dentine.

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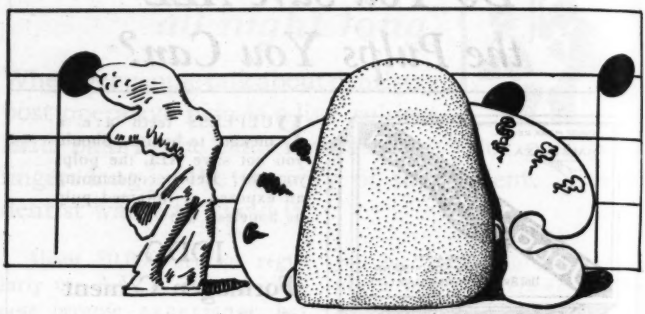
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As you sit entranced through one of those immortal symphonies, your soul stirred to its very depths by the crash of brass or the soft singing of the strings, how completely unconscious you are of the science of Harmonics which underlies the composition.

Nor are you any more conscious of the laws of harmony in a beautiful piece of sculpture or the creation of a master of the brush and palette. Yet because they all—composer, sculptor, artist—heed the requirements of harmony, you lose yourself in mute admiration of their works.

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In crown work the first and most important step toward Harmony lies in using

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for they were carved to harmonize with natural teeth. And it is not surprising that it took Dr. J. Leon Williams, an artist and sculptor as well as dentist, to discover the basis of tooth Harmony and to apply to dentistry those principles of Harmony which are the foundation of all art. This true artist's work is available to you today in Trubyte Crowns.

It is difficult to conceive a natural tooth for which a harmonious **Trubyte Crown** cannot be selected—so wide is the range of Trubyte Crown moulds and graded sizes. If you will but exercise *your* sense of Harmony in selecting and adapting the crown, you will create a restoration so Harmonious that the restoration itself is lost among the patient's natural teeth.

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1 SILVODENT, the non-caustic silver oxy-eugenol, sets hard enough for a real foundation.

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This is a later product, but the result of keen investigation and experimentation extending over several years. Since its advent it has rapidly made a distinct and *most favorable impression* upon those members of the profession who have used it.

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Whether it is a severe dental hemorrhage, or a burn by carbolic acid, or a case of leucoplakia, you will find in this book what to do for the patient without the "if's" and "where's" of the text-books.

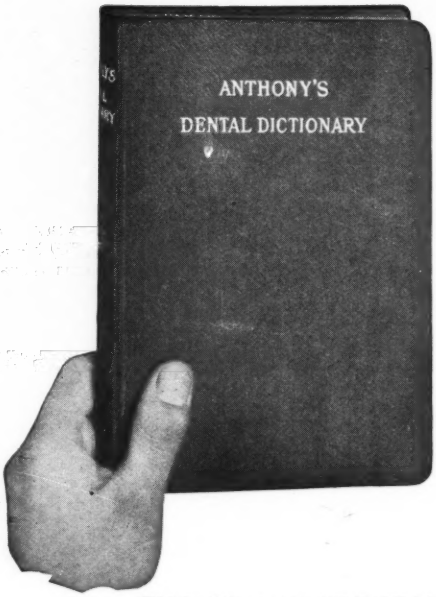
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[OVER]



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Associate Editor of the Dental Cosmos; Chairman of the Committee on Nomenclature of the American Dental Association.

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Local Anesthesia in Dentistry

All the necessary facts are given in this work—preliminary measures, agents for anesthesia, novocain and its solutions, the injecting solution of novocain-suprarenin, dosage, instruments, preparation of patient, indications, dangers and accidents, technic (in every detail and with thorough regional consideration), and anesthesia in children. Particular attention is called to the extremely valuable tables for Injection Anesthesia which show the *method best suited for each tooth*—the first column lists the various teeth and gives the period of waiting; the next column gives the technic to be employed in single cases while in the following column is shown the technic for cases complicated by periostitis, abscess, parulis, etc.; next is taken up the mountings of syringe; then the quantity of solution, one column for labial or buccal injections and another for palatal or lingual injections. A very helpful chart shows clearly the Distribution of the Sensory Branches of the Trifacial Nerve.

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We asked 1000 Dentists

What, in their experience, are the principal causes of *Pyorrhea*

Aside from neglect of teeth, which may, in the last analysis, be held responsible for most teeth and mouth disorders, the specific and immediate causes indicated by the answers, summarized, are as follows:

TARTAR	**50%**
Diet	15.5%
Systemic	14 %
Traumatic Occl.	10 %
Unsanitary Brushes	4.5%
Acid Mouth	3 %
Poor Dentistry	3 %

Most of the dentists answering the questionnaire said that they knew of no dentifrice which would prevent or remove tartar. Quite a few of them indicated that their tests on Mu-Sol-Dent, made within the last two years, had convinced them that *here, at last, is a preparation which will, to a large degree, prevent tartar.*

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Note How Our Porcelain Hides the Entire Bicuspid Gold Crown

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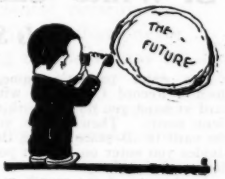
It's lasting!

For over 25 years Colonial Alloy has been proving up 100% for bright finish and endurance—67% silver is one reason.

Ask for sample

1 ounce . . . $ 2.00
5 ounce . . . 9.00
10 ounce . . . 17.00

S. H. REYNOLDS & SONS CO.
100 Boylston Street, Boston, Mass.



Your Future

can be pleasant as well as profitable if you

Study Mechanical Dentistry

in delightful California. Los Angeles, the fastest growing American city in the west. The shortest way to greater pay to be considered. Write your name and address here

.....

.....

mail at once and we will tell you about the

SCHOOL OF MECHANICAL DENTISTRY

747 South Hill St. Los Angeles, Calif.



S. S. White Card Index System No. 2

Is Simplicity Itself

You enter patient's name, etc., upon a Record Card, and with that card at hand you do the work the patient needs. Then before you put the card in its place among the Buff Guides you enter on it what you have done and the charges.

At the end of the month you send out bills for the month's work, transferring the cards to the Salmon Guides, there to remain until paid in full.

When full payment has been made and credited the card is filed among the Blue Guides to await the next coming of the patient.

Your accounts are thus divided into three classes—

Active (Buff Guides), work under way.

Passive (Salmon Guides), billed, but unpaid.

Closed (Blue Guides), paid in full.

Then there is a Bill Card, on which you enter names and amounts when you send out bills and a Cash Card, to show the cash receipts.

Any time and in a moment you can tell just where and how any patient stands with you.

Suits the largest or smallest practice.

Prices

200 record cards, 3 sets of guides, 25 cash or bill cards, 50 examinaton blanks No. 3, and follower block, in black japanned tin case with lock and key.....$13.00

Record Cards separately per 100..... 1.75

Outfit with sterling rule same price

THE S. S. WHITE DENTAL MFG. CO., Philadelphia

"Since 1844 the Standard"



KRYPTEX

A New Cementing Medium

FOR CROWNS, INLAYS AND BRIDGES

Its tensile strength is a hundred percent greater than that of the best zinc cement and fifty per cent greater in crushing strength. It is far more permanent—does not expand or contract—is extremely tenacious—mixes and packs with the greatest ease—and it is translucent.

You may know much about dental cements but until you have given Kryptex a trial you have never experienced such perfect cementing results as may be obtained with this new cementing medium.

An illustrated booklet will give you full particulars. Ask for a copy and for a sample to make your own test.

For Sale by Dealers and Our Houses

The S. S. White Dental Mfg. Co.

"Since 1844 the Standard"

Philadelphia

THE S. S. WHITE DENTAL MFG. CO.,
211 South 12th Street, Philadelphia, Pa.

Please send me Free Sample of Kryptex and Booklet.



Dr.....

Address.....

City..... State.....

Dealer's Name.....



Ash's
Hand Made Forceps

Have Stood the Test of Nearly 100 Years with the Dental Profession *Throughout the World.*

BEING hand welded of the best steel, nickel-plated, we recommend them for Lightless, Strength, Temper, Finish and accuracy of adaptation. The beaks of each are made to fit the teeth for which they are intended so perfectly that a firm grip can be obtained and sufficient pressure applied for the removal of any tooth without danger of crushing the crown. The illustrations show two of our popular patterns for extracting roots. Pamphlet showing all patterns of Forceps and Elevators mailed on application direct or thru your dealer.



Claudius Ash Sons & Company
U. S. A. INCORPORATED
1 Union Square New York City

Pain

THE Practitioner is called upon daily to treat conditions associated with pain.

Removal of the cause of pain cannot always be accomplished promptly. In the meantime, the patient interested only in being freed from discomfort and from pain as quickly as possible, frets under the delay.

To allay the immediate pain requires the administration of an analgesic that is promptly efficacious, free from contingent effects on the circulatory apparatus and on the organs generally, non-narcotic and not habit-forming.

PYRAMIDON

Made by the makers of
NOVOCAIN-SUPRARENIN

fully meets these requirements

H·A·METZ LABORATORIES, INC.
122 HUDSON ST NEW YORK

H. A. METZ LABORATORIES, INC.
122 Hudson St., New York.

Please send me a trial quantity of Pyramidon

.....D. D. S.

OH-12-25 .....

RUMORS spread by irresponsible persons have led some to believe that this business is for sale. We wish to contradict such statements most emphatically. No offers for purchase are being entertained, and none are solicited.

Such changes as have been made in the Lee S. Smith line have been solely for the purpose of simplifying our task, leaving us free to concentrate on the manufacture and sale of filling material.

In January 1926 we celebrate the sixtieth anniversary of this business enterprise, and the support which has been accorded us by the dental trade through these years is acknowledged with sincere appreciation.

Our purpose is to continue to merit the approval of the dental profession and the hearty co-operation of the reputable dental dealers.

LEE S. SMITH, *President*
Lee S. Smith & Son Mfg. Co.

Pittsburgh, Pa.
Nov. 1st, 1925

And it is so easy to break away



Habit is responsible for most of the drudgery and a great deal of the discomfort that dentists experience in their daily work. Making mussy, messy, spilly mixtures in doing prophylactic work cannot be defended on any other ground than—habit.

It does not cost any less. It simply wastes more time.

Make your prophylactic work inviting, both to yourself and patients. Save time by using

Prophylax-O Tablets

(Gardner)

They are inexpensive. They are clean and always kept in sanitary form. Always ready—just take one out of the container. And the ingredients are balanced in just the right proportion—abrasive agent—polishing agent—antiseptic tonic—all in one. Break away from the mixing habit, learn how efficient and convenient Phophylax-O Tablets are by asking us for samples. Can be had at your dealer's.

Mail the coupon today

ELLIS-JONES DRUG CO., Memphis, Tenn.
Please send free samples of Prophylax-O Tablets (Gardner)



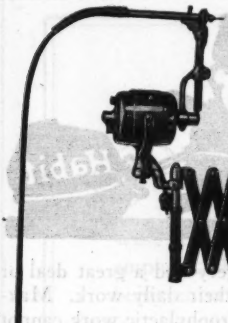
Dr. .....

Address .....

.....

Dealer .....

.....



Jack Rabbit Engine No. 12

The Jack Rabbit Engine is made in three styles as shown in our new catalogue. This is the No. 12 with the wall bracket. It is furnished in either cable type with the No. 7 hand piece or all cord arm with the Doriot hand piece. S. S. White hand pieces are used on all Jack Rabbit Engines.

This engine complete as shown in the picture, including foot control and all cable $70.00

Our new catalogue for 1926 is now ready, showing a number of new articles.

The T. M. Crutcher Dental Manufacturing Company
419 South Third Street - - - Louisville, Ky.

LEARN MECHANICAL DENTISTRY
Practical instruction—day or evening. Three to nine months' course. Special Scholarships available. Unequalled Curriculum. Also Post-graduate course for Dentists and Practicing Dental Mechanics. Established over 30 years. **Write Dept. 10-H for 36-page catalog, Scholarship Offer, and Outline of Curriculum.**
BODEE DENTAL INSTITUTE
N. Y., 136 W. 52 St.—Phila., 1305 N. Broad St.—Buffalo, 501 Washington St.—B'klyn., 85 Court St.

JIFFY TUBES

Build the filling *from* the apex, eliminating air-cushions. Ask your dealer or Lee S. Smith & Son Mfg. Co., Pittsburgh, U. S. A.

Send me your name and address if you would like to test PETRY Patented RETAINERS



and I will send you a complete outfit free. In thousands of cases Petry Retainers have proved successful after other devices have failed to perform satisfactorily. You be the judge!
(Dealers and laboratories: write for information.)
JACOB PETRY RETAINER COMPANY
2022 Lowrie Street N. S. Pittsburgh, Pa.

A Devitalizer *Without* Arsenic

Now! by the use of Neo-Devital you can safely devitalize without fear of apical troubles or sloughing caused by arsenic.

Neo-Devital is one of a series of treatments known as **Neo-Products** and contained in the **Neo-Product Package F.** They were developed by years of research by Dr. E. P. Brady, Professor of Chemistry of the Washington University School of Dentistry, St. Louis, Mo.

Neo-Product Package F also contains Dr. Brady's other progressive, time-saving essentials. They are as follows:

Neo-Balsam Compound, a most efficient treatment for root canal work which fills a need that nothing else meets.

Neo-Capper, a wonderful submarine pulp capper that covers the whole field of pulp protection.

Neo-Siltrate, an ammoniated silver nitrate treatment which precipitates free silver without the use of formaldehyde requiring but just 6 minutes to apply. In the treatment of pyorrhea one application does what many treatments of drugs require and does it more thoroughly.

Neo-Obtundo Cement, a cement that is a sedative and a filling material combined which adheres to the wet cavity walls. Think what that means in time saved alone when working with children.

The Technique and the use of these wonderful preparations is within the time limit of any dentist's practice yet so efficient that they coincide with the ideas of the most critical operators.



Neo-Product
Package F

16 Bottles of Time and Trouble saving Preparations.

At your first-class dealer

We have literature describing these ingenious preparations illustrated with testimonial radiographs. Send for it; the attached coupon makes it easy.

A. A. Brown Dental Mfg. Co., Boyle and Olive Sts., St. Louis, Mo.
Dec. Please send data on Neo-Products Package F.

Dr. _____

Address _____

Dealer _____

—is for AWFUL

—the way you feel when you must correct loose or misfit dentures the **old** way.

Here's the **new** B. P. P. way:

It is pretty nice to be able to correct loose or misfit dentures with **B. P. P.** this easy effective way:

Place **B. P. P.** on dentures; press the plate on model or in mouth; excess squeezes out, leaving only enough to compensate for defects; flask with one pour; no opening of flask is necessary; vulcanize same time and temperature as vulcanite rubber.

That's why thousands are using **B. P. P.**

Colors, red and black; full directions with each package; sufficient for 8 to 10 dentures, $3.50.

For sale by all good dental dealers

PIONEER MFG. COMPANY
Macon, Missouri.

B.P.P.

for misfit plates

DENTISTS

Use and Recommend "The Original Iodine Dental Cream."

They are finding out—by trying it themselves and by having their patients use it—the scientific and practical merits of ZI-O-DINE; for *cleaning* and *whitening* the teeth, and as a relief from sore gums and a preventive against *pyorrhea* and *gingivitis.*

Iodine, to make it antiseptic; *zinc,* to toughen the gums; *magnesium carbonate,* to neutralize mouth acids; *menthol,* to soothe and heal—that's ZI-O-DINE.

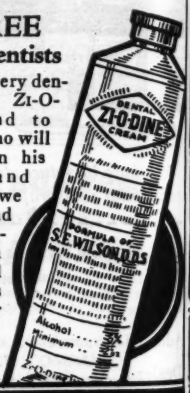
ZI-O-DINE

Pure White—Clean Taste—No Grit.

That's why everybody likes ZI-O-DINE—and why dentists prescribe it—after trying it. And why we can afford to offer ZI-O-DINE

FREE To Dentists

We want every dentist to try ZI-O-DINE. And to everyone who will write us on his letterhead and ask for it, we shall be glad to send, absolutely free, a full-sized tube. Let us have *your* request.



IODINE PRODUCTS CO.
Laurel, Miss.

Your Patients Will Notice the Difference!

SMOOTH—as Satin

SATIN DENTAL TAPE—Six Sizes
FLEXIBLE LIGATURE—Three Sizes



STRONG
It does not snap and waste professional time.

THIN
It slips between close teeth while under perfect control. Best for the gum.

Size 3 for Patients **Size 4 for Clinics**
Size 2, Twisted, for Ligature

Manufactured for those who recognize and require QUALITY.

If you treat pyorrhea you cannot afford to be without this smooth and pliant silk.

Small sample and prescription pads upon request.

John D. Cutter Co.

1 oz. Dome $2.25
½ oz. Jar - .75

3384 Bedford Avenue
Brooklyn, N. Y.

The original manufacturers of dental floss of quality

FREE if INTERESTED

35 years ago **KONDON'S CATARRHAL JELLY** *began doing good*

For HEAD—NOSE—THROAT

For Catarrh—Influenza—Cold in Head—Nasal Catarrh—Stopped Up Nose—Bad Breath—Inflammation of Skin and Tissue. Thousands of Dentists, Physicians and Nurses recommend KONDON'S.

FREE OFFER

Any Dentist, Student, Nurse or Doctor who will write us on their own stationery will receive FREE a tube of KONDON'S CATARRHAL JELLY for own personal use, and samples for patients and friends. KONDON'S is sold by the entire drugtrade.

KONDON'S CATARRHAL JELLY
Is a Household Necessity

O. H. 25. **Minneapolis, Minn.**

Over 5000 Dentists answered this ad last season

SHARPS
Low Fusing Metal

Melts much below the boiling point of water. Cools quickly. Is extremely hard when cold. Forms no dross or oxidation on the surface when heating. Is clean, white and the finest FUSIBLE METAL made. Sold in two-ounce ingots. Fifty cents each.

We also make a very nice COPPER LADLE, nickel plated, at seventy-five cents each.

Lest you forget, fill in and mail the coupon.

The W. M. Sharp Mfg. Co., Inc.
40 Wall Street
Binghamton, N. Y.

THE W. M. SHARP MFG. CO., INC.,
40 Wall St.,
Binghamton, N. Y.

Please send me.....Ingots of Sharp's Fusible Metal; also..... Copper Ladles.

Send to.....

Street and No.....

City and State.....

Charge through .....

(Name of dealer)



This matter of wishing

Merely wishing you could find time to do bigger things, or save more money, or for any of the things the dentist finds desirable, never gets you very far.

Very often getting anywhere means breaking with old-fashioned, aggravating, time-consuming and expensive methods.

Crowning work should easily be among the most satisfactory and profitable branches of dental work.

LINCROWNS

were, and are, designed first to accomplish more satisfactory crowning results, and along with that to save untold time and money for the dentist.

That they do, thousands of dentists who have discarded the old-fashioned method of taking impression and bite and waiting for problematical laboratory results, gladly testify.

Lincrowns come in all required sizes, with handy Lincrometer and dentimeter. Instantly selected and quickly adjusted. Returnable at any time for replacement or credit.

Don't stop at wishing you knew more about them. Mail the coupon. Sold by good dealers and salesmen.

LINCOLN
Dental Mfg. Company
1726 Sansom St., Philadelphia

ALBRIGHT
TOOTH BRUSH
A PRODUCT OF
RUBBERSET CO.

A toothbrush you can safely recommend. 4118 dentists designed it—20,000 now endorse it. Penetrates into the *hard-to-get-at-places* where decay so often begins.

Write for sample

RUBBERSET CO. Newark, N. J.

Buy a Kellogg Compressor and save the difference

$140.00

Through nearly all reliable dealers

Kellogg Mfg. Company
Rochester, N. Y.

CALOX
The
OXYGEN
TOOTH POWDER



Girvin-Duplex
Saliva ejector and cotton roll holder

will save the moderately busy dentist from a half hour to an hour every day, to say nothing of the saving in cost of cotton rolls and the annoyance of having the field of operation flooded at a critical moment.

It affords *comfort* for the patient and *convenience* for the dentist. It is quickly and easily applied and gives the added advantage of a *third hand in the mouth* without an assistant in the way.

Ask us to mail you the booklet that tells all about it in words and pictures.

Price Complete $6.50

LEE S. SMITH & SON MANUFACTURING CO.
PITTSBURGH, U. S. A.

[*Reproduction of advertising appearing nationally*]

YOU are probably sick and tired of reading endless arguments about tooth paste—which to use and why.

¶ Here is the story of Listerine Tooth Paste in a nut-shell:

¶ It's made by the makers of Listerine. It tastes the way you want it to taste. It does its work well.

¶ It is sold at a price you like—25 cents for the large tube. And if we charged you a dollar a tube we couldn't offer you a better tooth paste.

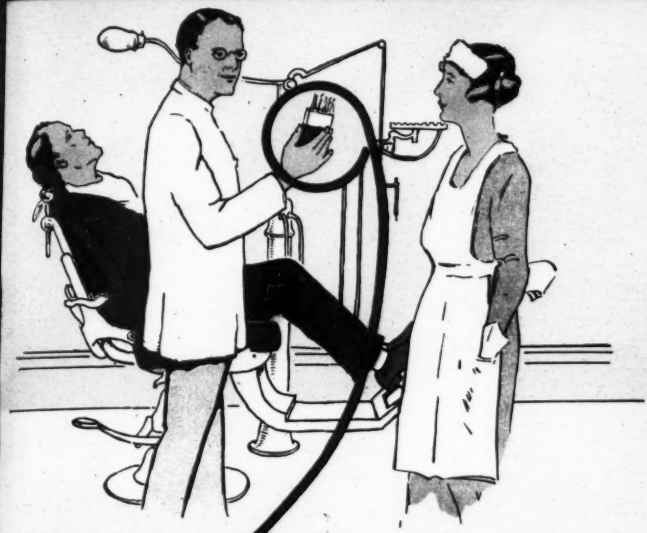
¶ Try it once * and we'll wager you'll come back for more — unless you're different from thousands of people who have switched to Listerine Tooth Paste.

Lambert Pharmacal Company
St. Louis, U. S. A.

*Its wonderful refreshing effect alone has converted thousands to the use of this paste.

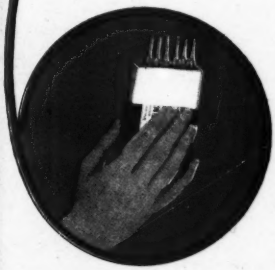
LISTERINE TOOTH PASTE

Large Tube—25 Cents



"Waite's is not made with an ordinary salt or Ringer solution."

Also manufacturers of
Waite's
DENTAL CREAM
Recommended by Prominent Dentists.



Waite's
Antiseptic
Local Anesthetic
In Ampules

"We're not going to make any more anesthetic ourselves," said the dentist to his assistant, "and here's the reason: "This Waite's Antiseptic Local Anesthetic is made on a base of Ortho and Para Mono-Iodo Phenol—something we can't duplicate ourselves."

"This base is both an anesthetic and an antiseptic, and preserves the solution indefinitely. It provides longer, stronger anesthesia than procaine or cocaine alone—and being antiseptic prevents infection and facilitates rapid healing of tissue."

"Besides, it's cheaper to use than to take the time mixing our own, so after this, we'll use Waite's in convenient, hermetically sealed ampules or bottles."

THE ANTIDOLOR MFG. CO.
80 Main Street
Springville, Erie Co., N. Y., U. S. A.
Fort Erie, Ont., Canada



and
don't forget
to use

Waite's
ANTI-PY-O
DENTAL CREAM



IT is only fair to yourself and your work to *insist* on your patients using a dentifrice that backs up your work. Recommend Waite's because it:—

1. Removes placques, tartar and stains without scratching the enamel.
2. Eliminates hundreds of millions of germs in the mouth.
3. Corrects acid mouth, thereby preventing decay of the teeth.
4. Cleans, polishes and whitens the teeth.
5. Leaves a cool, clean, refreshing effect in the mouth.
6. Makes healthy gums a habit.

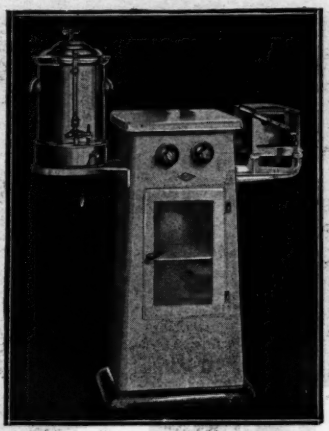
You can do no better than to recommend Waite's.

Send for large tube free.

THE ANTIDOLOR MFG. COMPANY
80 Main Street
Springville, Erie Co., N. Y., U. S. A.
Fort Erie, Ont. Paris, France

CASTLE

2 gallon water sterilizer
11" instrument sterilizer



No. 1410-A

Assures patients of sterilizing safety

In the 1410-A provision is made for sterilizing all the water, that in the gauge glass and draw-off faucet included.

Neither can infection be transmitted via tray handles, as they are sterilized with instruments.

Furthermore the beauty of lines and finish is a background for your patients' impression of your care for their safety.

Please send me literature on No. 1410-A

Dr......

Address.....

CASTLE

Sterilizers for Dentists, Physicians, Surgeons, and Hospitals

WILMOT CASTLE CO. 1158 University Ave., Rochester, N. Y.



For Perfect Models

A new material for use in place of alloy in the making of models.

CERTIFIED MODEL CEMENT

In its plastic state will reproduce to perfection, the most delicate details of a cavity.

When it sets it becomes as hard as onyx.

For inlay models, where extreme accuracy is required, try Certified Model Cement.

It covers a new field. There is nothing else like it.

Package containing two ounces of powder with liquid to mix—

LEE S. SMITH & SON MANUFACTURING CO.
PITTSBURGH, U. S. A.

Fresh, Spotless and Convenient—

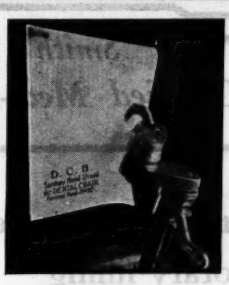
Whisk! On goes a new, individual, spotless headshield, refreshing and reassuring to the patient.

Whisk! Off it comes when the patient leaves the chair. No bother to the dentist, no collecting and assorting, no laundry bills.

D. C. B. Sanitary Head Shields

are practically perspiration-proof and can be fitted instantly to any of the head rests shown here. Not padded. Cost reducing as well as sanitary and pleasing. Your dealer and salesman can supply you.

David C. Baker
665 Fifth Ave.
New York

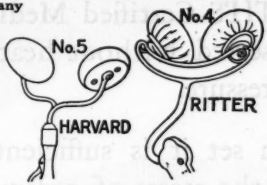


Price $2.00 per 100









Just mention number when ordering

QUALITY IS DEMONSTRATED BY THE RESULT

For thirty-five years Harvard Products have been giving results: here, there, everywhere

HARVARD CEMENTS

Introducing the new MASTER SILICATE

Crystone

HARVARDID

After 8 years' clinical tests—stainless—non porous—non devitalizing

Ask your dealer

L. A. & W. H. THOENEBE

Sole Agents for the United States

1513 North Thirteenth Street Philadelphia, Pa., U. S. A.

Under Trade-marks registered in U. S.

Smith's Certified Medi-Cement

Better than gutta percha as a temporary filling

SMITH'S Certified Medi-Cement is inserted without heat and without pressure.

When set it is sufficiently hard to resist the stress of ordinary mastication, yet is sufficiently soft to be readily removed with a spoon excavator.

Give this matetial a trial at our expense, fill in and mail the coupon now.

Lee S. Smith & Son Mfg. Co.,
Sharpsburg Sta.,
Pittsburgh, Pa.

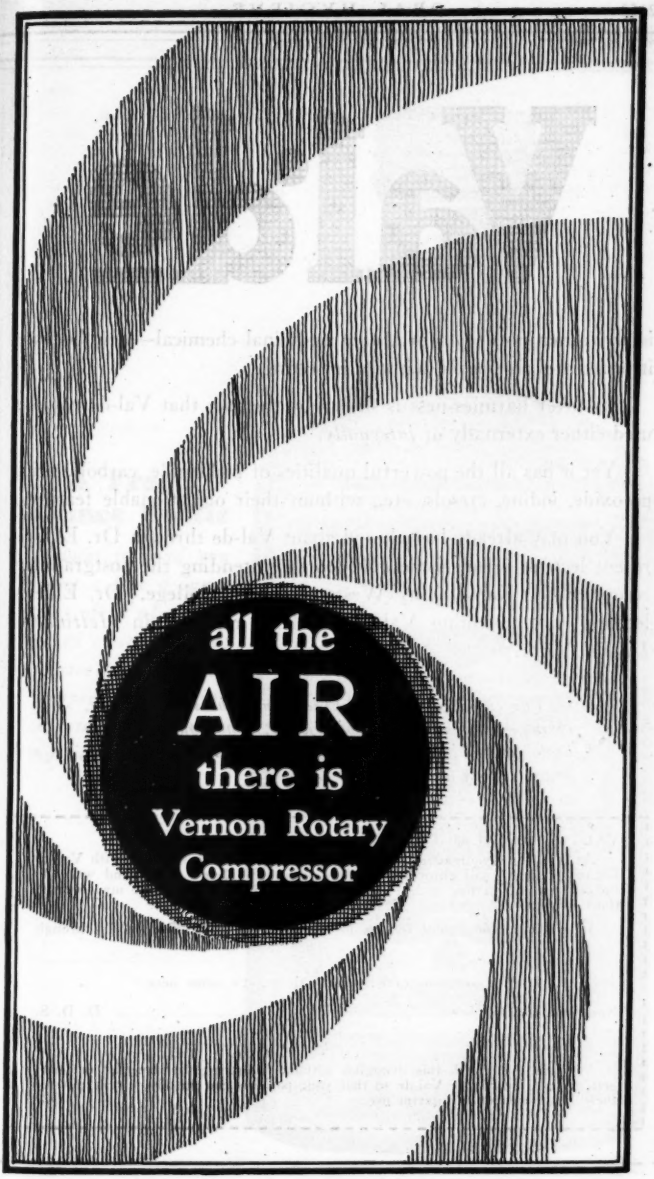
Please send me a liberal sample of Medi-Cement.

Name .....

Address .....

.....

Dealer .....


all the
AIR
there is
Vernon Rotary
Compressor

Val-de

is an aromatic solution of a *new* medicinal chemical—new because it penetrates and heals, without irritating.

Its utter harmlessness is shown by the fact that Val-de may be used either externally or *internally*.

Yet it has all the powerful qualities of bichloride, carbolic acid, peroxide, iodine, cresols, etc., without their objectionable features.

You may already have heard about Val-de through Dr. Elder's recent lecture before some 200 dentists attending the postgraduate course at the Kansas City Western Dental College. Dr. Elder's lecture, recommending Val-de has been reported in *Hettinger's Dental News*.

The enthusiasm of Dr. Elder, and others, for Val-de, springs from actual use of Val-de, hence our desire to have you fill in the coupon now so we can send you the gratis supply at once.

VAL-DE CHEMICAL CO., TOPEKA, KANS.

As offered in your advertisement, if you will keep me supplied with Val-de for office use, I will clinically test and observe Val-de's action and will use no other agent on five picked cases. In due time I will report my observations to you.

It would be convenient for me to receive my FREE office supply through

.....

(Put your preferred, nearby druggist's name here.)

Name and address here.....D. D. S.

.....

We will place with this druggist, without obligating the druggist or yourself, a small supply of Val-de so that your patients can readily purchase it for their home treatment interim use. D25

A Free 8-Ounce Bottle

We want to send you for test a free 8-ounce bottle of Val-de in special concentration; it dilutes to one gallon of proper strength for chair use. The coupon brings it promptly.



PROMETHEUS

Hospital Safety *at* Low Cost



This new low priced pressure sterilizer insures complete sterilization. Dressings are sterilized under 15 pounds pressure and then dried.

You Can't Afford Half-Sterilization

Complete sterilization is assured in this sterilizer, which is very simple to operate.

This new sterilizer is safe to use; note the safety valve and the automatic cut-off. It is constructed of copper and bronze throughout; only the best materials are used in the construction of this sterilizer.

PROMETHEUS ELECTRIC CORP.,
356 West 13th St., New York City.

Send me complete details of your new low priced pressure sterilizer.

Dr.....

Address.....

Dealer.....



Nifty!

That's what nine dentists out of ten say about this *Brazilian Agate Spatula* the first time they see it.

It is a beautifully balanced instrument made of Agate—the one and only *safe* material to use in a spatula for mixing any of the silicates.

The mixing surfaces are *flat* and the edges are *straight.*

$3.00

LEE S. SMITH & SON MFG. CO.
Pittsburgh, U. S. A.



IN this can you will find a dentifrice distinctly new to you, new in effectiveness — that is, new to *you* if you do not already know REVELATION TOOTH POWDER. It is not new to the many, many dentists who use it and prescribe it and have done so for long years. For a free, full-size package, send your card to *August E. Drucker Co., 2679 California St., San Francisco, California.*

REVELATION
for Teeth *and* Gums
—never in paste form

At the A.D.A. meet



At the Louisville meeting of the American Dental Association in October, all the papers and clinics were practically unanimous as regards the small, two-row tooth brush being the ideal prophylactic arrangement for the layman.

While of course they had no such thought in mind, those who participated in the discussions and clinics might well have been describing the

Dr. Butler Tooth Brush

The point is, the Dr. Butler Tooth Brush was designed to meet the very requirements, conditions and specifications brought out in the discussions at this most important meeting of the dental profession.

Proper shape of end, the two rows of bristles spaced for strength, and to permit ends to reach all surfaces and pockets, are backed by a sturdy, non-flexible handle which permits full-action scrubbing movement.

Send the coupon for full details of this hygienic brush.

DR. JOHN O. BUTLER,
1180 E. 63d St., Chicago, Ill.

Please tell me more about your tooth brush. 20

Dr.....

Address .....

Dealer.....

To Prevent Post Pain

Alladyne

(Tablets)

Formerly Orodyne

Has Proven Distinctly Superior

For sample and information

Winkworth & Co.
Fox Creek Station
Detroit - Michigan

Instead of extirpating the pulp—

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Please send free booklet by Prof. Gysi and new literature.

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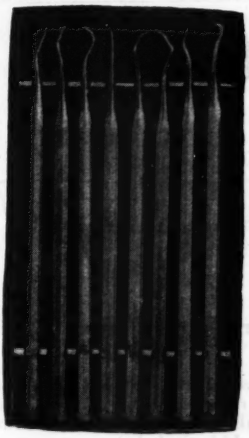
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Please be very sure to read pages 2304—and—2305 —thank you!



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A Hygienist's Set of 8 Scalers

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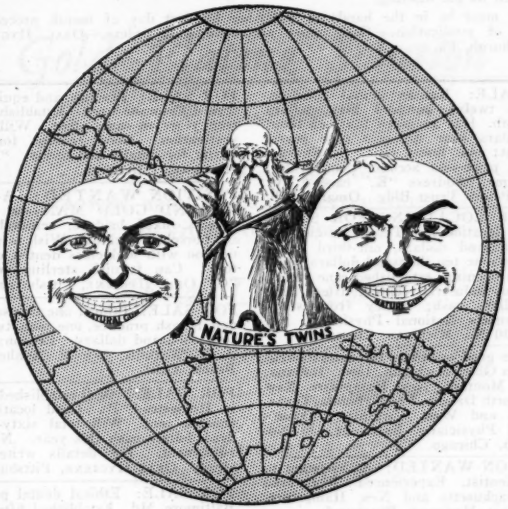
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Oral Hygiene *Bulletin*

ORAL HYGIENE is mailed monthly to every dentist whose name can be secured. The circulation guarantee is a minimum of 45,000 copies per issue. The present circulation exceeds a monthly average of 55,000 copies.

This page is restricted to help and positions wanted, practises wanted and practises for sale. The rate is 10c per word, initials and figures each counting as a word, each initial and figure of the address also counting as a word, as well as the heading.

Copy must be in the hands of publisher by first day of month proceeding date of publication. Cash must accompany all orders.—ORAL HYGIENE, Pittsburgh, Pa.

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DENTAL LOCATIONS FOR SALE: (a) Best location fine Tennessee city for three thousand dollars, one-third cash; annual income ten thousand dollars. (b) Michigan opening, established nine years; prosperous industrial center; fifteen hundred dollars cash; money from start. 40-D Aznoe's National Physicians' Exchange, 30 No. Michigan, Chicago.

WE have good openings for dentists registered in Ohio, Michigan, Iowa, Indiana, Kansas, Montana, New Hampshire, New York, North Dakota, Pennsylvania, Texas, Virginia and West Virginia. Aznoe's National Physicians' Exchange, 30 No. Michigan, Chicago.

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FOR SALE: Practice and equipment in a good Colorado town. Established seventeen years in same office. Will bear investigation. Good reasons for selling. Write for details and terms. "7," ORAL HYGIENE, Pittsburgh.

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(Continued on page 2370)

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(Continued from page 2368)

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ONE gram (about 15 grains) of Squibb's Dental Cream will neutralize the acid in—

141 CC (about 4⅞ fluid ounces) of saliva of a pH of 6.4
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One gram of Squibb's Dental Cream approximates the usual amount placed upon the tooth brush.

Milk of magnesia, while it has a high affinity for acids, is very slightly soluble, and will thus sustain a mildly alkaline level in the saliva for eight or ten times as long as dentifrices which do not contain milk of magnesia.

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The safe cleansing of teeth and neutralization of acidity is the heart of the dentifrice problem.

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Even with the wealth of the Indies and the famed beauty of the Houri, without beautiful teeth nothing can admit the unfortunate to the charmed circle of the blest, but to the edentulous patient in whom hope is all but lost your use of Trubyte Teeth comes as a promise of new life.

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RESTORATIONS THAT RESTORE

The DENTISTS' SUPPLY COMPANY
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WHEN THE SKIPPER drops an anchor he wants it to *hold* and to *hold* hard. When the ship is in the teeth of a gale she can't ride it out, "hove to" nor "run before," due to narrow sea-way or dangerous shoals or rocks. And at such a time is used not an anchor designed for the calm waters of a harbor, but one heavy and strong enough to counter the fierce tugging and tearing of an angry sea.

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Their baked-in split-ring anchorage is truly "an anchor to windward." It can't pull loose because it's baked into the porcelain.

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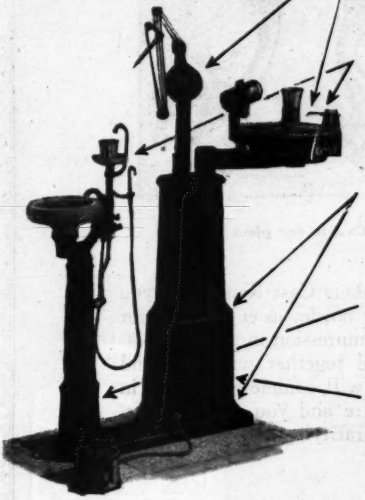


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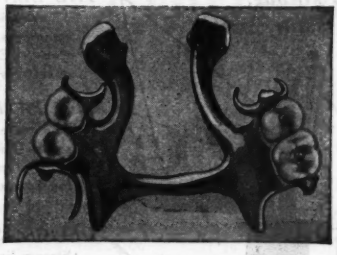
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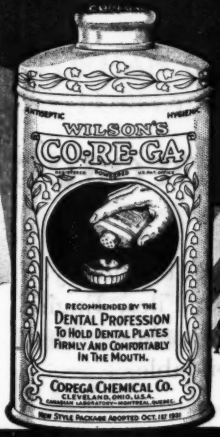
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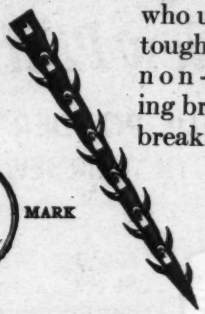
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the ASKO broach

Ask your dealer and salesman to show you also ASKO Spiral Broaches, Files, Engine Reamers, and Treatment Broaches. They are equally tough and dependable.

A. S. KOCH & SONS

Lancaster, Pa.

This is all we ask - - -

Of the many good things that may be said of Forhan's For the Gums, we ask you to remember ONLY FOUR:

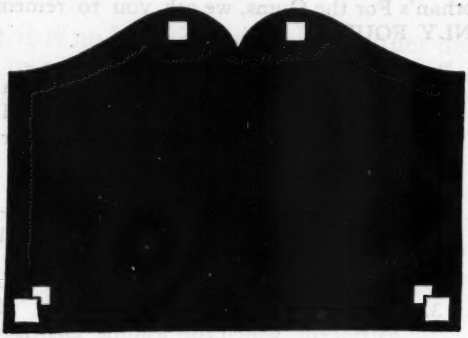
1. Forhan's For the Gums is the formula of R. J. Forhan, D. D. S., who devoted his entire practice to Pyorrhea for many years.
2. It is compounded from the purest ingredients under Dr. Forhan's personal supervision.
3. It contains a small percentage of astringent, which the leading Dentists use in the treatment of Pyorrhea.
4. It has proved beneficial to millions.

FORHAN COMPANY, NEW YORK
FORHAN'S Ltd., MONTREAL

Forhan's
FOR THE GUMS

Forhan's Pyorrhea Astringent is a recognized healing adjunct in the treatment of Pyorrhetic conditions. Its use is restricted solely to dentists. Order through your dental supply house.

What's Going on in This Picture?



WHO KNOWS? ALMOST ANYTHING might be happening, but nobody could tell unless some Light were thrown upon the scene.

How can you tell, Doctor, what kind of a cavity preparation you are making—what kind of a margin you are getting on your wax pattern—how you are packing that amalgam—unless you have *enough* of the *right kind* of *Light* on your *work*?

WHAT IS THE RIGHT KIND of a DENTAL LIGHT?

Let us tell you why we think the answer to the question is

The Patterson Dental Light

THE M. F. PATTERSON DENTAL SUPPLY CO.

M. F. PATTERSON DENTAL SUPPLY CO.,
406 Sixth Ave. South, Minneapolis, Minn.
Please send me your descriptive literature on the PATTERSON DENTAL LIGHT

Dr.....
Address.....
City.....
State.....



Month by month their sales increase

CORNING'S DENTAL RUBBERS

THERE MUST BE SOMETHING about Corning's Dental Rubbers to earn for them their ever-growing popularity among the profession and laboratories. And there is.

Corning's Rubbers are easy packing, non-shrinking, non-pitting and tasteless. Corning's "Blended Pink" Veneer is unequaled for naturalness of color. Corning's Baseplate Rubbers—"Dark Red," "Dark Natural" and "Golden Plate," and the other Corning Baseplates, are the strongest made.

The combination of all these qualities in Corning's Rubbers make them preferred by those who want the best. And once you know the working qualities of Corning's Rubbers you will have no other. That's why our sales increase.

Order through your dealer or direct

"Blended Pink," per ¼ lb. $2.50
"Dark Red," per ¼ lb.... 1.00
"Dark Natural," per ¼ lb. 1.00
"Golden Plate," per ¼ lb. 1.00

CORNING RUBBER CO.
Incorporated
266-270 Pearl Street
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Also makers of Corning's Baseplate and all other waxes.

Please send me—

[ ] Free Sample "Blended Pink."
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Dr.....

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Dealer.....

FRENCH'S DENTAL PLASTER

Leads in quality and economy. We have what the profession demands

WHITENESS

NOTE

Regular: for general work

Impression: for quick working

Slow Setting: for vulcanizing.

Samuel H. French & Co.
Philadelphia, Pa.
EST. 1844 INC. 1920

new!

BROWN'S VUL-CLEAN

a time-saver

Makes it easy to remove plaster from the inside of a vulcanized plate.

You can save time, assure accuracy and impart a smooth surface to the inside of your dentures by the use of BROWN'S VUL-CLEAN.

Send 10c in stamps to cover mailing of sample, or order a bottle from your dealer right away and become one of the many satisfied users of WHEELER-BROWN PRODUCTS.

PRICE PER 6-OZ. BOTTLE, 80c

Wheeler-Brown Specialty Co., Inc.
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An irregular, (malposed) tooth is an

OBSTACLE

in inserting a partial denture with clasps. The little KAYLE ATTACHMENT DEVICE placed on a clasp, over comes the trouble. The denture becomes seated WITHOUT STRAIN



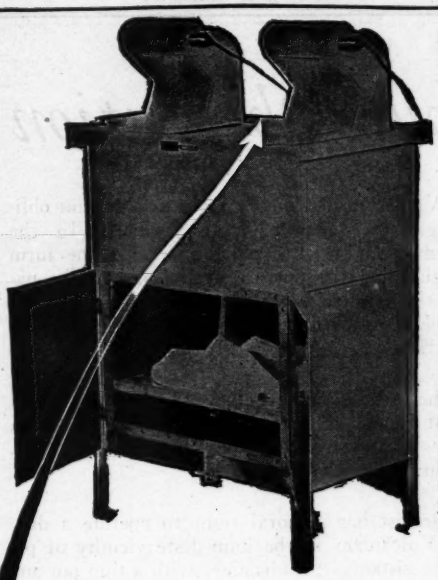
No matter what angle a tooth may have, a clasp with a KAYLE will glide over it, relieving the tooth of strain.

No unnecessary looseness between clasp and its connection to denture.

For tipping teeth, inclining teeth and for conditions where all posterior teeth are missing "there is no better attachment."

Send for literature

KAYLE CO. INC. **220 W. 42 St., New York**



This Dust Collector

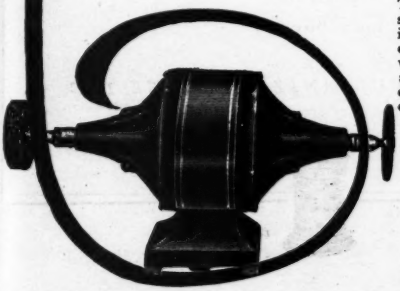
Will Suck the Dust Away From Your Grinding and Polishing Motor—

You simply stand the motor on this table top. There is another motor under the table to make the suction. All operates from your electric light socket just like your electric fan.

This is a most powerful dust collector, occupying very small floor space and nicely finished in gray enamel. It will give you most excellent service for many years.

Stop Breathing Polishing Dust
Stop Breathing Grinding Dust

The experience of 35 years in solving dust-collecting problems is back of this outfit, and our outfits are widely distributed amongst discriminating buyers. Vibrationless and without noise, it may be used anywhere.



Leiman Bros. Dust Collector for Dentists

The strong suction of air will suck in all the dust and hold it in the cabinet under the table—electric lights and removable water pans for pumice in each suction hood. Operates from electric light socket. Occupies only about 4 square feet.

Illustrated Catalog Free

LEIMAN BROS.
60 LP-8 Lispenard St.
New York

Makers of good machinery for 35 years

Your Obligation

EVERY professional man owes a certain obligation to his patient or client. In the medical arts this obligation takes the form of safeguarding the physical well being of the patient to the greatest possible extent, permitting nothing to be overlooked with regard to sanitation and sterilization.

In the dental field, however, there are other forms of danger aside from the chance of infection, and the greatest of these lies in the use of old, worn-out Vulcanizers.

No dentist has a moral right to operate a dangerous Vulcanizer in the immediate vicinity of patient or assistant. A Vulcanizer with a thin pot and a rusted packing joint has some unpleasant possibilities, considering that pressures of approximately 90 pounds to the square inch are maintained at 320 degrees.

Perhaps an examination of your machine will reveal conditions which you did not know existed.

BUFFALO DENTAL MFG COMPANY
BUFFALO, N. Y
U. S. A.
LOCK BOX 979

MAKERS OF VULCANIZERS SINCE 1867



Do You Want Absolute Accuracy For All Bridgework Models?

If you do, fill in your name and address and we will send you the Simplified Clasp Type Removable Bridge Technic and full description of PLASTIC METAL. Economical to use because of size of Ingot.

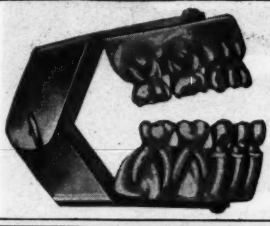
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Dr.....

Address.....





Perfect Reproduction

The Typodont shown here has a place in every dental office. In producing all models of the Typodont, the individual teeth were carved with every care. For the close student of Dental Anatomy the Typodont is invaluable. Ask your Dealer to show you all three models.

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PETER

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ORTHODONTIC APPLIANCES

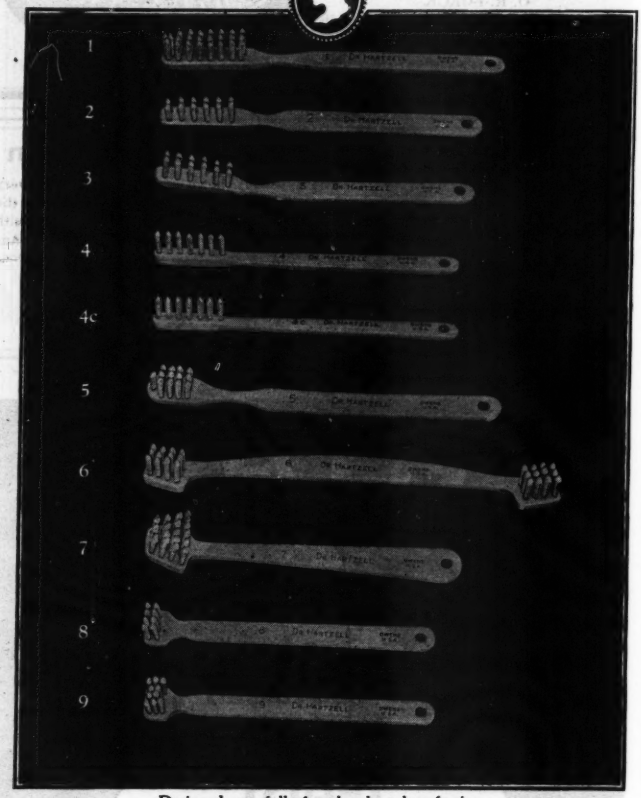
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CONTINUOUS COOPERATION

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Dr. Hartzell
TOOTH BRUSH



Designed especially for the dental profession

The bristles of Dr. Hartzell Tooth Brushes are stiff enough to wedge a little when pushed in between the teeth. So that the jiggling movement, made in the circulatory pressure of the sides against the gums, also scours off the bacterial mass. For particulars and prices please address

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MASEL'S

Seamless Ready-made

Gold Crowns

Are made by semi-automatic machines used exclusively by us. This results in reduced labor costs and a lower priced crown than any other maker can sell at like quality.

Masel's Seamless Ready-made Gold Crowns save time—reduce your costs—give satisfactory results.

Write for illustrated catalog.

MASEL DENTAL LABORATORY
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No Packings—No Washers

"Safety Syringe" has a smooth, ground glass barrel, fitted with metal plunger. It's leakproof! Ask your dealer for "Safety Syringe." Price 2cc, $5.00; 3cc, $5.50.

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409 Broadway South Boston, Mass.

IPANA TOOTH PASTE

Heals Bleeding Gums

A Dentifrice You Can Trust

Mouth cleanliness is the important subject before you today. It is an aid to the inhibition of dental caries.

The avowed purpose of Ipana is to promote a properly clean mouth.

Ipana has sheer cleansing ability. You can trust it to clean teeth thoroughly and to polish them to a noticeable brilliancy.

Because of its Ziratol content, Ipana aids in the professional treatment of soft, spongy and bleeding gums, thus it is beneficial to the entire oral cavity.

Use Ipana personally. Finish your prophylaxis with a brushing of it. Both you and your patients will like the smooth, snappy and delightful flavor.

A Professional Package for the Asking

BRISTOL-MYERS CO.
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SAL HEPATICA

Shows all your finances at a glance!

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Simplified Dental Cash Book

Provides the facts every dentist *needs* at the time he needs them most.

Endorsed by leading dentists and supply houses.



Ask your dealer to show copy or send for folder illustrating how TAXFAX saves you time and money.

The Dental Press -Waltham, Mass.

A beautiful denture is a credit to the man who made it, and gives him a better reputation.

Gilbert's Metallic Lining

not only looks better—it is better and fits better.

This lining is in fluid form and is painted on before vulcanizing, and the plate comes out with a perfect aluminum lining.

Price per package, enough for 10 dentures - - - - $1.00

Gilbert's Model Dressing

Gives the finishing touch

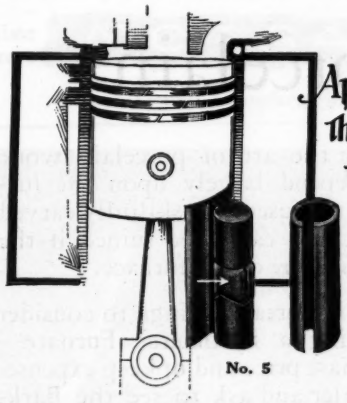
to the model also to the finished denture. It should be used not only when the plate is unlined, but with ***Gilbert's*** Metallic (Aluminum) Lining, to give it the very best appearance.

Price per package - - 75c

All goods guaranteed

Money returned if not satisfied

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No. 5

Applying the Piston Ring to Dentistry

The New Supplee Attachments Nos 5 & 6

The life of an attachment is often measured by the life of the tension device. When you think of the tension device in the New Supplee Attachments Nos. 5 & 6 think of the piston ring and the countless thousands of times it travels up and down the cylinder walls. Yet, rarely is one replaced.



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The principal of the spring tension *on the post* of Supplee's No. 5 & No. 6 is the same. Lightly pressing against the walls of the female section it holds firmly yet "gives" sufficiently to permit easy insertion or removal of the denture and allows for compensating movements. And, like the piston ring, the Supplee tension device is not weakened by friction. It is built to withstand years of use.



Supplee Attachments Nos. 5 & 6 are suitable for long and short bites, partial dentures and bridges. No. 5 is for use outside of crown abutments; No. 6 for use within inlays. Write for illustrated literature.

Prices: No. 5 $7.50 ea. No. 6 $10.00 ea.

Paralleling Mandrels $1.50 ea.



No. 6

No. 6 Actual Size

THE BETTER LABORATORIES USE THEM

Sold by all dealers

SAM'L G. SUPPLEE & COMPANY

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Porcelain

Results in the art of porcelain work depend largely upon the furnace in which it is fused. A skilfully carved jacket crown could easily be ruined if the operator was not *sure* of his furnace.

Here are three important things to consider when purchasing a Pyrometer Furnace—accuracy, purchase price and upkeep expense. Go to your dealer and ask to see the Barkmeyer Furnace. Compare it with others and then judge for yourself.

No better furnace could be made regardless of cost

PRICE COMPLETE $165.00
EXTRA MUFFLE $45.00
MUFFLE EXCHANGE $25.00

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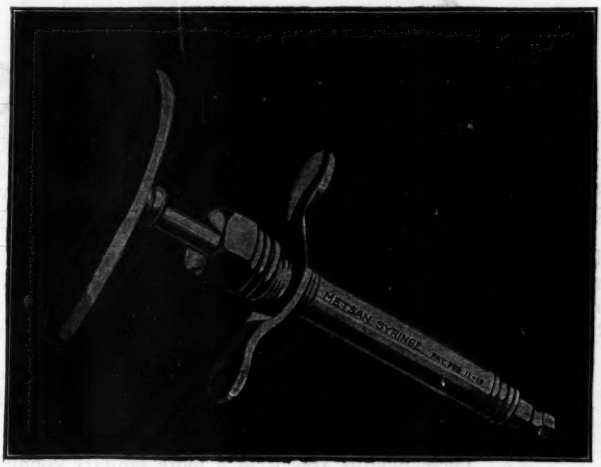
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549 West Washington Boulevard, Chicago, Ill.
Please send details.

Dr.....

Address.....

178 East 85 Street, METSAN New York City

Metsan Dental Manufacturing Company



Tried and Proven

The Metsan is not an experiment. It is a distinctive style of syringe, different from any other in that is neither ground-in nor lubricated.

It has a record of its own of years of most satisfactory service in practical use by many thousands of dentists throughout the world.

To use a Metsan is to enjoy the advantages of a perfect Syringe

Style A $3.75 Style B (adapter) $4.75

Send me your booklet describing Metsan non-leakable and boilable syringes.

Dr.....

Address .....OH 12-25

25 patients —3 months

On March 7, 1925, the Dental Clinic conducted by the Marland Refining Company, Ponca City, Okla., put 25 employes on Mu-Sol-Dent.

These 25 employes were selected because their mouths were the most difficult to keep in sanitary condition, and they were instructed to use Mu-Sol-Dent according to directions. On June 16, 1925, the dentist and operator in charge reported as follows:

"They [the 25 patients] have given it a very thorough test and we find that it does as well or better than you claim for it.

"These mouths are all in a more sanitary condition, *and there is practically no mucin film or tartar on their teeth.* We also had one or two cases of hypersensitiveness which have been entirely overcome.

"We are now advising all employes to use Mu-Sol-Dent, and we feel we can recommend it in the highest degree."



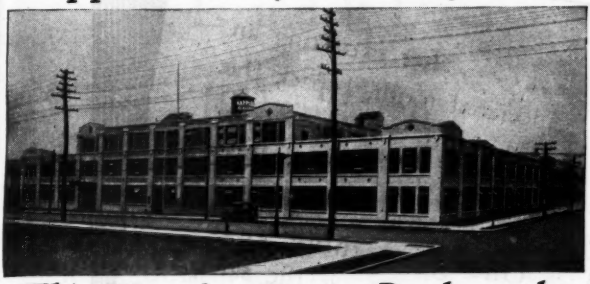
CERTIFICATE of DISCOVERY
THE MELLON INSTITUTE of INDUSTRIAL RESEARCH
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Certifies that C. C. VOGT, A.M., Ph.D., an Industrial Fellow at the Institute, discovered and perfected the formula of "MU-SOL-DENT" which is chemically an efficient solvent of mucin plaques.

Free Sample!

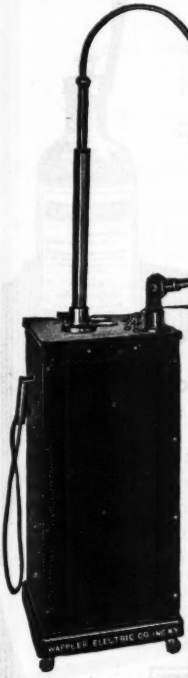
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Mu-Sol-Dent

Wappler X-Ray in Every Office



This Wappler Factory Produces the



WAPPLER DENTAL X-RAY UNIT

Some of the Distributors ready to serve you are:

B. Altman Co., 210 Erie Terminal Bldg., Youngstown, O.; The Dental Co. of Canada, Ltd., 229 College St., Toronto, Can.; Dental & Medical Supply Co., 605 Lamar Life Bldg., Jackson, Miss.; The Dentists' Supply Co., 220 W. 42nd St., New York City; M. Feldman & Co., 611 Penn Ave., Pittsburgh, Pa.; H. Fischer & Co., 792 Lexington Ave., New York City; General Dental Supply Company, 387 Grand St., N. Y. City, 391 E. 149 St., N. Y. City, 60 Graham Ave., Brooklyn, N. Y.; The Harvard Co., Spring Garden Bldg., Philadelphia, Pa.; Hauser & Smith, 303 4th Ave., New York City; Hettinger Bros. Mfg. Co., 10th St. and Grand Ave., Kansas City, Mo.; Hettinger Bros. Dental & Surgical Supply Co., 315 N. 10th St., St. Louis, Mo.; Mills Dental Depot, 700 Main St., Buffalo, N. Y.; R. & E. Dental Supply Co., 100 W. 126th St., New York City; Rubinstein Dental Equipment Co., 110-114 W. 42nd St., New York City; U. S. Dental Depot, 1774 Pitkin Ave., Brooklyn, N. Y.; John Welch Dental Depot, Broadway and Oak, Portland, Ore.; S. S. White Dental Mfg. Co.; 84 Market St., 152 West 42nd St., New York City; or any Wappler Sales and Service Agent.

Please tell me about the WAPPLER DENTAL X-RAY UNIT and special payment plan. O.H. 1225

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Address .....

My dealer's name is .....

Located at .....

WAPPLER ELECTRIC COMPANY, Inc.

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"..... after extracting an ulcerated tooth, I pack the socket with cotton, saturated with Absorbine, Jr., and leave for several minutes ..... One good thing about Absorbine, Jr. is the safety with which it can be used ... and should any of it get on other tissues, it will cause no trouble ..... it allays pain ..... is healing, cooling, soothing ...."



A True Germicide – Non-Toxic Non-Destructive of Tissue

Letters received from the profession during a quarter century, and supported by many laboratory tests, afford ample evidence that Absorbine, Jr. is a remarkable aid in relieving post-operative pain and in effectively destroying streptococci and other germs.

Professional samples on request

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Absorbine Jr
THE ANTISEPTIC LINIMENT

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ALKALOL is a catalyst, which brings about an entente cordiale between dentist and patient. It isn't designed to tickle the palate. It does dissolve mucus and pus, inhibits bacterial action, deodorizes, subdues inflammation and promotes normal secretion. It "freshens" the mouth. Nor does ALKALOL overstimulate secretion or favor tissue relaxation. Patients prefer it. After extraction, during operation, as a prophylactic, to establish and promote oral hygiene, ALKALOL meets dentist requirements in a way that makes it not only popular with patients but preferred by the dentist for personal and family use.

Get personally acquainted with ALKALOL. It's worth while.

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QUALITY LEADERS from the makers of the BEST in Dental Office Apparel.

Style 30	from fabric	22 Linene Suiting	$3.50 ea.	or 3 for	$9.00	In ordering, specify height,
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" 24	" "	22 Linene Suiting	2.50 "	" " "	6.50	measurement
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CHAIR COVERS—For all make chairs $2.75 per set or two sets for $5.00. Samples mailed on request.



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Quotations are on Fabric 22, Nurses' Linene Suiting. A soft and finely finished material that will give the utmost in service and appearance.

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Style Book of "Correct Professional Wear" and Samples of materials mailed on request.

Doctor, if you are not using a preparation that absolutely stops pain after extraction, your patients, if they knew (as you do) that such a preparation exists, would say:—

Oh! What Needless Pain We Bear!"

You can stop this needless pain by applying—





STOPAIN

after extraction and to the gums after setting crowns and bridges. STOPAIN is a germicide, a styptic and a powerful antiseptic. It is a complete and perfect preparation—it sterilizes, stops the bleeding and the pain and prevents the formation of any foreign matter in the socket.

STOPAIN should be applied on a small piece of cotton or gauze.

STOPAIN is Sane—Safe—Sure!

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Prepared and guaranteed by

KING'S SPECIALTY COMPANY
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ESTABLISHED 1858

L. LELONG & BROS., *Inc.*

Refiners

and

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Dental Gold

Platinum
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New Dental Gold in return for old gold, scrap, filings and sweep, through your dental dealer.

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Oral Prophylaxis

THE positive germicidal action and benign healing properties of Zonite indicate it very strongly in all phases of oral prophylaxis.

It is mildly haemostatic and stimulates the healing and regrowth of infected or lacerated tissues.

Zonite (stabilized electrolytic sodium hypochlorite) is particularly successful in post-operative treatment at the chair and in the home between visits to the office.

Standard laboratory tests have shown Zonite to be more powerful germicidally than any dilution of phenol that can be used with safety on human tissues. Yet it is non-poisonous and non-caustic and may be safely prescribed for application away from the chair.



Members of the profession are welcome to a liberal sample of the product for testing purposes.

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Sal Hepatica

The Standard Saline

Laxative and Eliminant

Many pathologic dental conditions are aided by the addition of systemic treatment to that of instrumentation.

Elimination of accumulated toxins from the entire organism is an essential requirement.

SAL HEPATICA is especially efficacious as a general laxative and eliminant in the systemic treatment of pyorrhea, spongy gums and many other pathologic oral diseases.

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PROFESSIONAL GARMENTS
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Dental Smocks
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Ask your dealer to show you our line or write him for our catalogue.

For all INFECTED WOUNDS in the MOUTH

Pyorrhea, Trench Mouth, Ulcers, Abscesses, Pus Pockets, etc.

MAC'S BLACK LOTION

is the ideal antiseptic, non-irritating, healing dressing and bacterial germicide.



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137 Broadway
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Sample on request **6 oz. bottle $1.00**

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We believe the same . . . for these reasons:

THE Pepsodent formula is based on the dominant dental opinion of today.

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You respect the theories of yesterday. But you practice those of today.

Some men, naturally, disagree with you. Old-school principles always die hard.

But science has ever progressed. And greater things thus been achieved. The theories of yesterday are giving place to the advancements of today.

Thus while you practice modern principles in your work, we practice it in ours.

Yours, you know about. But ours, you may not.

Will you permit us, then, to send you much interesting information along those lines, together with a tube of Pepsodent to try?

Pepsodent
REG. U. S. PAT. OFF.

The New-Day Quality Dentifrice
Endorsed by World's Dental Authorities

THE PEPSODENT COMPANY
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Please send me, free of charge, one regular 50c size tube of Pepsodent, with literature and formula.

Name.....

Address.....

Enclose card or letterhead 1810

EVERY CLOUD A SILVER LINING
EVERY PLATE A ROSCINIAN LINING

THE Roscinian Linings are Metallic Linings of 24K gold or aluminum to be used on all new rubber dentures, counteracting the deleterious effects of the vegetable product caoutchouc, on the palatal tissues contacting with a denture in the oral cavity; especially valuable in preventing heated, spongy gums; producing and sustaining a strictly *oral hygiene*. The mechanical effect is really beautiful and your professional suggestion is gladly paid for.

The Roscinian Gold Lining XX (Our Standard	$5.00	Sufficient for One Upper Denture
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¶ Buy from your dealer or remit direct. Samples, literature and directions awaiting your request. Directions simple.

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¶ If necessary, send your lining cases to our laboratory for the Roscinian Linings to be put on, where your denture will be made and finished, representative of the highest art in this branch of prosthetic dentistry.

THE ROSCINIAN COMPANY

Metallurgists and Manufacturers of Metallic Linings — 8003 Woodlawn Avenue, S. E. Cleveland, Ohio, U. S. A.

Manufacturers to the Nobility of the Profession

THE NEW IVORY BAND MATRIX RETAINER NO. 9



This retainer works on the same principle as the Ivory No. 8 Matrix Retainer, the same bands used for both. This new retainer simplifies the adaptation of the band to the retainer.

The band encircles the tooth and is held firm by the angular projecting arm, which abuts against the anterior buccal corner of the tooth. Price with bands, $4.00; extra bands, per dozen, 40 cents.

ALL DEALERS—Manufactured by

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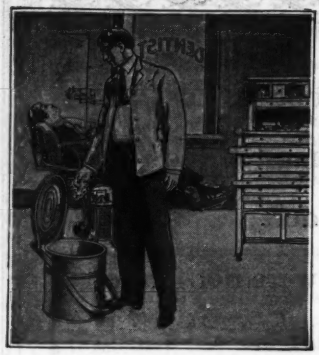
Now, again to our friends
In every city, hamlet and
Town, we pay our
Respects. If it were not for you
Our name would be
Unknown. Therefore we
Salute you and wish you
Only joy and happiness in this
Xmas season, and
Immeasurable prosperity every
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The Prophylaxis of Dental Caries

The Cause of Dental Decay: The presence in the mouth of lactic and butyric acids formed by bacterial action on food particles.

The Results of Dental Decay: Roughening, softening and penetration of the enamel; damage to the dentine; the formation of cavities affording lodgment for pathogenic organisms, with subsequent development of root abscesses, gingivitis, pyorrhea, etc.

How to Prevent Dental Decay: The daily, systematic application of a suitable, non-irritating, non-abrasive alkaline fluid is the best and most practical method of controlling or preventing dental decay. This is not an empty assertion, but it has the support of authority.

Note. Thousands of your fellow-practitioners have made the discovery that "Phillips' Milk of Magnesia" is just such a fluid. It completely fills the bill. It is the ideal alkalinizer for use in the human mouth.

Why You Should Specify "Phillips' Milk of Magnesia"

a. It is pure, i. e., free from every trace of deleterious substances.

b. It is a hydrate and, therefore, has a special affinity for acids.

c. It acts immediately and efficiently, and has no disagreeable effects.

d. It is three times as efficient as bicarbonate of sodium and *fifty times* as powerful as lime water in neutralizing acids.

How to Use "Phillips' Milk of Magnesia"

Kindly instruct your patients to rinse the mouth with a tablespoonful of "Phillips' Milk of Magnesia," at least twice a day, and invariably at bed-time, as acidity is most likely to develop during sleep.

The nightly application should be made in the following way: Cleanse the teeth well with a tooth brush and warm water. Rinse the mouth thoroughly, then take a tablespoonful of "Phillips' Milk of Magnesia" and work it back and forth through the spaces between the teeth for a few moments—the object being to reach every surface of all the teeth. After rejecting the superfluous portion *do not rinse the mouth again, but allow the alkaline film of Magnesia to remain on the dental surfaces.*

An excellent plan is to use "Phillips' Milk of Magnesia" as a dentifrice, on the toothbrush, instead of preparations containing precipitated chalk.

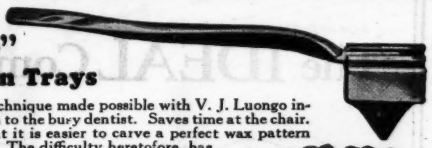
PHILLIPS' Milk of Magnesia

CAUTION. The dentist is advised to beware of imitations of "Phillips' Milk of Magnesia." The genuine product bears our registered trade-mark. Kindly prescribe in original 4-ounce and 12-ounce bottles obtainable from druggists everywhere.

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Accuracy in indirect inlay technique made possible with V. J. Luongo inlay impression trays. A boon to the busy dentist. Saves time at the chair.

Every operator knows that it is easier to carve a perfect wax pattern on a die than in the mouth. The difficulty heretofore, has been in getting proper impressions of cavities from which a die may be made.

With these trays a perfect modeling compound impression may be taken with ease of any properly prepared cavity occlusal, mesial, distal, mesio-distal-occlusal or cervical in any part of the mouth.

An amalgam die packed in the impression will be found to produce all margins perfectly.

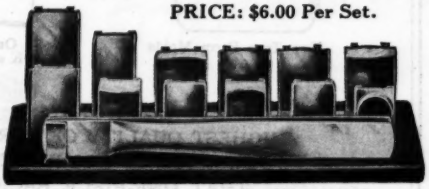


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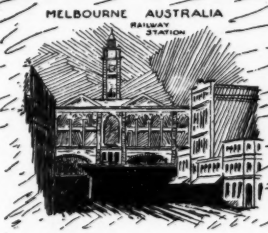
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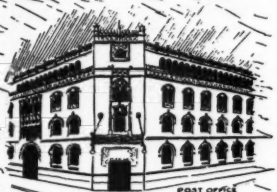
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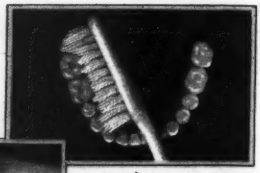
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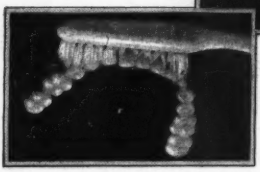
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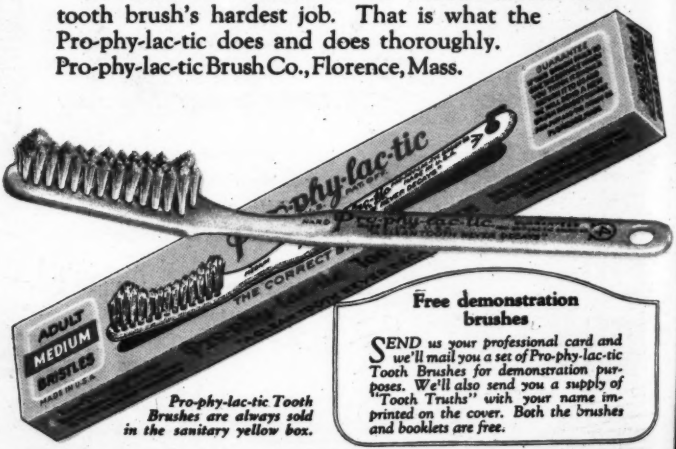
Note above how the Pro-phy-lac-tic end tuft cleans even the backs of the molars.

And to the left, see how the serrated bristles reach and clean in between the teeth.

THE teeth a patient sees in his mirror are the ones he is apt to brush most thoroughly. He is surprised, perhaps, when you tell him these teeth, being more subject to natural cleansing, need less attention than the molars.

To be sure, the Pro-phy-lac-tic Tooth Brush cleans the teeth that show up in the mirror. Any tooth brush can do that. But — more important — the Pro-phy-lac-tic reaches all surfaces of the molars. From these hard-to-get-at-teeth, it removes mucin and calcareous deposits by means of the large end tuft. With its serrated bristles, it cleans in between the molars.

To clean all surfaces of the hidden molars is a tooth brush's hardest job. That is what the Pro-phy-lac-tic does and does thoroughly.
Pro-phy-lac-tic Brush Co., Florence, Mass.



Pro-phy-lac-tic Tooth Brushes are always sold in the sanitary yellow box.

Free demonstration brushes

SEND us your professional card and we'll mail you a set of Pro-phy-lac-tic Tooth Brushes for demonstration purposes. We'll also send you a supply of "Tooth Truths" with your name imprinted on the cover. Both the brushes and booklets are free.